

**UNICEF
SIERRA LEONE**

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LIST OF ACRONYMS

ANC	-	Ante Natal Care
ARI	-	Acute Respiratory Infection
BCG	-	Bacillus Calumet Guerin
CAG	-	Cash Advance to Government
CAP	-	Consolidated Appeal Process
CBO	-	Community Based Organisation
CCA	-	Common Country Assessment
CCF	-	Christians Children's Fund
CFN	-	Children's Forum Network
CMT	-	Country Management Team
CO	-	Country Office
CP	-	Country Programme
CPMP	-	Country Programme Management Plan
CRC	-	Convention on the Rights of the Child
CREPS	-	Complementary Rapid Education for Primary Schools
DDR	-	Disarmament, Demobilisation and Reintegration
DEO	-	District Education Officer
DEVINFO	-	Development Information
DEPAC	-	Development Partners Committee
DFID	-	Department for International Development of U.K.
DHMT	-	District Health Medical Team
DPT	-	Diphtheria Pertussis Tetanus
EFA	-	Education for All
EPI	-	Expanded Programme of Immunization
FAO	-	Food and Agricultural Organization
FAWE	-	Forum for African Women Educationalists
FSU	-	Family Support Unit
GMC	-	Global Movement for Children
GOSL	-	Government of Sierra Leone
HIV/AIDS	-	Human Immune Virus/ Acquired Immune Deficiency Syndrome
ICDB	-	International Children's Day of Broadcasting
IEC	-	Information Education and Communication
IMEP	-	Integrated Monitoring and Evaluation Plan
IT	-	Information Technology
MCH	-	Mother and Child Health
MDG	-	Millennium Development Goal
MEDIAC	-	Media Alliance for Children
MEST	-	Ministry of Education, Science and Technology
MOHS	-	Ministry of Health and Sanitation
MSWGCA	-	Ministry of Social Welfare, Gender and Children's Affairs
MTR	-	Mid-Term Review
MTSP	-	Mid Term Strategic Plan
NaCWAC	-	National Commission for War Affected Children
NAS	-	National AIDS Secretariat
NaCSA	-	National Commission for Social Action
NCDDR	-	National Commission for Disarmament, Demobilisation and Reintegration
NGOs	-	Non-Governmental Organisations
NID	-	National Immunisation Day
OPV	-	Oral Polio Vaccine

ORS	-	Oral Rehydration Salt
OVC	-	Orphans and Other Vulnerable Children
PER	-	Performance Evaluation System
PHU	-	Peripheral Health Unit
PMTCT	-	Prevention of Mother to Child Transmission
ProMS	-	Programme Manager System
PRSP	-	Poverty Reduction Strategy Paper
RC	-	Resident Coordinator
SSA	-	Special Service Agreement
SSL	-	Statistics Sierra Leone
TBA	-	Traditional Birth Attendant
TRC	-	Truth and Reconciliation Commission
UN	-	United Nations
UNCT	-	United Nations Country Team
UNDAF	-	United Nations Development Assistance Framework
UNDP	-	United Nations Development Programme
UNFPA	-	United Nations Population Fund
UNHCR	-	United Nations High Commission for Refugees
UNICEF	-	United Nations Children's Fund
UNIFEM	-	United Nations Development Fund for Women
UNIOSIL	-	United Nations Integrated Office in Sierra Leone
USAID	-	United States Agency for International Development
VCCT	-	Voluntary Confidential Counselling and Testing
VOC	-	Voice of the Children
WB	-	World Bank
WATSAN	-	Water and Sanitation
WFFC	-	World Fit for Children
WFP	-	World Food Programme
WHO	-	World Health Organisation
WSD	-	Water Supply Division
WVI	-	World Vision International

OVERVIEW

The year 2007 is the last year of the 2004-2007 country programme of cooperation in Sierra Leone. In 2008, a new three year programme will start, in harmony with the Government PRS and the 2008-2010 UNDAF.

The year 2007 has witnessed a number of significant changes for Sierra Leone, of which two are particularly worth noting. The first is the successfully concluded presidential and parliamentary elections, perhaps the best proof of the progress made by Sierra Leone on the road to peace consolidation and development. A new cabinet is in place since November 2007 and citizens are looking forward to the opportunity it will bring for economic growth and human development. The second is the adoption of the long awaited Child Rights Act in June. The Act supersedes all other existing national laws related to children and adopts the international definition of the child as any person under 18 years of age. The adoption of the Act will enable Sierra Leone to make several changes in laws and policies to be in harmony with international commitments made earlier.

Other positive developments as far as the children's rights agenda is concerned include the endorsement of the Education Sector Plan and the qualification of Sierra Leone for the Fast Track Initiative; the drafting of the National Strategic Plan for Reproductive and Child Health and the large support that donors have expressed to contribute to the implementation of these two National Plans.

Sierra Leone however continues to face several challenges in its economic development, not the least of which are limited domestic revenue, lack of fiscal space required for sustainable poverty reduction and for addressing key priorities for children, such as health, education and social services, high levels of unemployment especially among youth and a weak infrastructure.

For UNICEF, 2007 has been characterized by intensive efforts to put in place the new country programme. The 2008-2010 programme was approved by UNICEF Executive Board in September 2007. The Programme contributes to the child related MDGs by addressing the goals of the PRSP (particularly in the areas of health, education and child protection). The 2008-2010 Country Programme will also contribute to the five priorities of the United Nations Development Assistance Framework (UNDAF 2008-2010) in Sierra Leone, namely: (1) governance and human rights practices advanced at all levels and enforcement arrangements in place; (2) enhanced livelihood of youth, women and vulnerable groups; (3) improved health for children under five years of age and for women of childbearing age and reduced child and maternal mortality rates; (4) improved country wide access to basic education for boys and girls alike, and; (5) increased access to HIV/AIDS prevention, treatment, care and support services and decreased morbidity and mortality.

Through its high level advocacy and resource leveraging for children, UNICEF has succeeded in taking a seat at the negotiation table with donors, development partners, and Government on key child priorities in Sierra Leone. UNICEF also succeeded in maintaining and even further strengthening the transition from an emergency and relief based approach to programming to a human rights based approach, looking at long term sustainable development. Changing course and making the upstream shift have not been easy and smooth at all times, but the strong commitment of senior management and staff to change has facilitated this process and kept it going forward.

In terms of progress on the One UN Agenda, a Joint UN Programme was developed in 2007 in support of the National Reproductive and Child Health Plan. The Joint Programme runs for three years 2008-2010. So far, UNICEF, WFP and UNFPA are part of this Programme, with other UN agencies possibly joining later. Less success however was achieved in terms of the opportunity provided by the presence of UN Integrated Office on Peace Building and Peace Consolidation. While the UN Integrated Office has played a critical role politically in Sierra Leone (e.g. on elections), the integration of the development agenda was not that successful, including in the area of human rights promotion and protection. The UNCT and the mission, although under the same leadership of the ERSR/RC, continue functioning both in programmatic and operational terms very separately. UNICEF is often in a rather uniquely uncomfortable position as all areas of peace consolidation/building are of certain relevance for children and children's rights and therefore is often the sole agency interested/concerned about proper integration.

1. COUNTRY SITUATION IN RELATION TO THE MILLENNIUM GOALS AND COMMITMENTS

1.1. Major changes at the political and economic levels

The successfully concluded presidential and parliamentary elections in September 2007, conducted within an atmosphere of democracy and freedom of expression are perhaps the best proof of the progress that Sierra Leone is making on the road to peace consolidation and development. On September 17, 2007 Ernest Bai Koroma of the All People Congress Party (APC) won the elections and was sworn in as president of Sierra Leone.

In their campaign manifestos, all three main political parties running for the elections recognized the need to improve the situation of children in Sierra Leone and they all considered education for all children as the most serious challenge their country is facing. The three main parties acknowledged as well the priority that needs to be given to health, but referred to a lesser extent to the right of children to protection from violence, exploitation and abuse.

A new cabinet took office in early November 2007. A number of ministries were merged together, based on effectiveness and budget management grounds. The most significant has been the merging of the Ministries of Finance and of Development and Economic Planning into one Ministry for Finance and Economic Development.

An IMF mission in November 2007 noted that output growth in Sierra Leone continues to be robust at about 7 percent. No major change was noted in 2007 with respect to the national revenue sources. Remittances and investments from the Sierra Leone expatriate community, selected mining investments and foreign aid continued to be the main propellers of economic growth and the source of increase in gross domestic product.

A fiscal challenge faced over 2007 has been the shortfall in external budget support provided by donors. This was triggered by an IMF report on absence of audit of government accounts since 2002. In response, the government adopted tight cash targets, which led to the accumulation of substantial payment arrears, notably for school teachers and health workers. The mobilization of domestic revenue continues to be weak, hence not enabling the creation of the fiscal space, despite the cancellation of external debt, required for sustainable poverty reduction and for addressing the priority areas of health, education, electricity and water supplies.

The newly elected Government prioritized good governance and fighting corruption. Reports indicate that a number of government officials are under investigation, but so far, no major breakthrough has been noted in this area. Transparency International has ranked Sierra Leone as 150 out of 179 countries. International donors, as well as the IMF, continued to underscore the importance of enhancing the efficiency of public spending and of strengthening governance and accountability.

As Sierra Leone was declared eligible to benefit from the Peace Building Fund at the end of 2006, efforts focused in 2007 on ensuring that relevant projects are initiated. So far however, the 35 million US Dollars allocated by the Peace Building Fund have not been entirely obligated. The Peace Building Fund Steering Committee co-chaired by the Ministry of Foreign Affairs and the UN has had several bottlenecks in its work, and the results obtained are not up to the expectations awaited. It is useful, in this context, to recall that the Peace Building Commission had identified a number of critical areas that impede the consolidation of peace in Sierra Leone, which will need to be addressed to help lay the foundations for sustainable peace and create the enabling environment for development and reconstruction. These are: youth empowerment and employment; consolidating democracy and good governance; justice and security sector reforms, capacity building, energy and sub-regional dimension of peace building.

1.2. Major changes at the legal level

A major milestone for children's rights in Sierra Leone this year has been the adoption by Parliament of the Child Rights Act in June 2007. The Act, which has been in the making for many years, supersedes all other existing national laws and adopts the international definition of the child as any person under 18 years of age. The Act adopts non-discrimination as one of its founding principles and emphasizes the accountability of duty bearers focusing on the best interests of the child as a primary consideration in any decision or action that may affect children. As such, the Act represents an opportunity for Sierra Leone for making a number of national laws and policies more aligned with international standards and hence enable it to honor the international commitments to the CRC. The Act meets also many legal recommendations addressed by the CRC Committee. The removal of the provision referring to initiation practices from the Act, at the last minute before the Act was adopted, received high attention from international media. However, the Act still contains sufficient guarantees to protect children against any harmful practice.

Another milestone achieved in terms of a legal protective framework for women and children's rights has been the adoption of three Gender Bills by Parliament in June 2007: the Domestic Violence Act, the Devolution of Estates and the Registration of Customary Marriage and Divorce Act.

Although these Acts might primarily be seen as women's rights acts, there are several provisions in them that make them of great benefit to children such as: the definition of domestic violence as involving children; the provision that no child shall be deprived of the estate of a parent whether or not born in wedlock, and; some form of protection for girls/women in customary marriages. Although there are some concerns that the Registration of Customary Marriage and Divorce Act did not specifically prohibit marriages under the age of 18 years, yet the Act still provides some form of protection, as most marriages in Sierra Leone are customary and polygamous.

1.3. The situation of Sierra Leone with regard to the MDGs

Sierra Leone has been ranked as the last country (177 out of 177) in the 2008 UNDP Human Development Report. The situation regarding the MDGs today remains unchanged from what was reported in 2006; MDGs 1, 4, 5 and 8 are unlikely to be met, while MDGs 2, 3 and 7 are likely to be met with special efforts and MDG 6 is likely to be met with the current level of efforts.

About 70% of the country's population live below the poverty line, and 26% can be classified as extremely poor. Regional inequities persist in poverty levels, with 15% of people living below the poverty line in the capital Freetown, compared to respectively 79% and 70% for the rural and other urban areas. While it is generally recognized that a PRS is under preparation for 2008-2010, so far no draft has been shared with donors and international community members. There are strong indications however that human development issues including health, education, water and sanitation and the social services will remain prioritized.

Infant and child mortality rates, 158 and 267 per 1,000 livebirths respectively, are the highest in the world. The MDG target for under-five mortality in Sierra Leone is to reduce it to 100 per 1,000 livebirths by 2015, which is highly unlikely to be achieved. . Sierra Leone has also the highest maternal mortality rate in the world, estimated at 1,300 per 100,000 live births. The MDG target for maternal mortality in Sierra Leone is projected at 150 per 100,000 live births by 2015, which means a reduction of about 11% annually.

However, a positive development in 2007 revealing Sierra Leone's commitment to the child and maternal health related MDGs and the initiation of work in that direction is the development of a National Strategic Plan on Reproductive and Child Health. The plan has been developed in a consultative process, involving all partners, as well as district health teams. Several coordination mechanisms were put in place to achieve the health related MDGs, including: the National Health Policy Advisory Group, chaired by the Minister of Health and Sanitation and co-chaired by UNICEF (on behalf of the Health Development Partners), in charge of policy and strategic planning, monitoring and evaluation of the child and maternal health MDGs and a technical National Steering Committee for Child, Sexual and Reproductive Health. A Health Development

Partners Group co-chaired by UNICEF and DFID has also been formed for coordination and aid harmonization among donors and development partners and for technical support to Government. A grant of 30 million US dollars – the first to be financed by the Africa Catalytic Growth Fund - was disbursed by the World Bank in early 2007 and part of this grant has been allocated to district level health plans. The 2008-2010 UNDAF also has child and maternal health as one of its five priorities with focus on reduction of child and maternal mortality.

Sierra Leone will have to make also special efforts to achieve the MDGs on education and gender equality. There are however positive indications in that direction including the development of an Education Sector Plan (ESP), the allocation of 20% of national budget to education and the qualification of Sierra Leone for the Fast Track Initiative. In June 2007, at a large meeting in Bonn, donors pledged 13.9 million US dollars to fund the ESP plan (its total cost being 19 million US Dollars). A funding modality and the mechanism for disbursement of funds, monitoring and evaluation has been agreed recently, and therefore Sierra Leone will soon be able to make use of these funds.

While no major gender disparities are noted at the level of primary education, those disparities tend to increase as children move towards secondary education. There are several barriers to girls' education, including among others, child marriage, teenage pregnancy, a largely non-conducive school environment, cultural and religious biases and a low proportion of female teachers.

Only 47% of the population has access to safe water sources, ranging from 84% in urban areas to 32% in rural areas. Improved sanitation facilities are used only by 30 percent of the population. There is also a continuing substantial growth in the size of the population living in urban slums around the capital Freetown, which adds to the poor sanitary and environmental conditions.

Institutionally, the water and sanitation sector in Sierra Leone is weak and fragmented. Responsibility for water services lies with the Ministry of Energy and Power, but there is no defined lead role for the sector. Sanitation has been devolved to Local Councils since 2005 and water is in the process of devolution to the Local District Councils since 2006; but the water and sanitation structures at district level suffer from inadequate human and financial resources and there is lack of clarity on the roles and responsibilities of the Councils in relation to water supply, sanitation and hygiene promotion.

In the course of 2007 however, a water sanitation and hygiene programme design has been formulated with collaborative efforts involving Government of Sierra Leone, DFID and UNICEF; its purpose is to strengthen the water and sanitation sector in Sierra Leone and to help the country get on track to meet the MDG target for water and sanitation. DFID has committed 32 million UK pounds for this programme. The programme is expected to start in 2008.

The overall prevalence of HIV in Sierra Leone is 1.53%, while the prevalence in pregnant women is much higher (4.1%). Efforts need to be maintained with a stronger emphasis on prevention, especially among high risk groups and out of school children; addressing the strong stigma attached to HIV/AIDS, and; the integration of PMTCT and pediatric care in the national health care delivery system.

Finally, it is worth mentioning that Sierra Leone has been selected as one of the ten pilot countries for the UN Secretary General High Level Initiative to Support MDGs commitments in Africa, with the aim of mobilizing the full resources of the UN system and its partners in achieving the MDGs in Africa.

1.4. The situation of Sierra Leone with regard to the Millennium Declaration

The situation of Sierra Leone with regard to the Millennium Declaration reveals that the country is still lagging behind in terms of some key issues. The implementation of the recommendations of the Truth and Reconciliation Commission whose report was published in 2004 is minimal. An evaluation mission in 2007 noted that both the recommendations and the TRC report itself were not widely disseminated, and that no work was done on reparations. In 2007 also, there were a number of reports from international human rights

organizations that highlighted that the women and girls who were deliberately and systematically targeted for sexual violence during the war years have not received justice or reparations. Many of them, according to these same reports, continue to suffer psychological, physical, social and economic effects years later.

The establishment of the National Human Rights Commission at the end of 2006 is a milestone in terms of the promotion and protection of human rights in post conflict Sierra Leone. However, results are yet to be seen, especially with regard to the financial independence of the Commission and its accessibility to the public.

1.5. Other important information on the situation of children and child rights in Sierra Leone

The situation of the 2.3 million children living in Sierra Leone (close to 50% of the total population) remains precarious.

Sierra Leone has some of the highest under five child malnutrition rates worldwide. Since 2000, the number of under weight children has increased by 24% while the number of stunted children has increased by 31%. The prevalence of low birth weight is high (25%) and it is believed that this prevalence rate is underestimated, especially since the determinants for low birth weight are substantial in Sierra Leone: anemia prevalence among women of child bearing age is 70%; 13% of women have low body mass index (VAC 2005). The high rates of malnutrition and mortality observed in infants and young children in Sierra Leone are due to a large extent to poor infant feeding practices. A qualitative study of these practices was conducted by the Ministry of Health and Sanitation and UNICEF towards the end of 2007; preliminary results indicate that there are significant cultural barriers and beliefs that need to be addressed to effect the change desired in infant and young child feeding practices.

Malaria is still the leading cause of mortality for children under five years of age. The MICS 3 survey (2005) indicated that only 5% of children under five sleep under an Insecticide Treated Net (ITN). However, a survey conducted by CDC Atlanta at the end of 2006- early 2007, following the integrated national child health campaign involving measles, vitamin A, mebendazole and ITNs revealed that 56% of under five children sleep under a bednet. The report of the study has not been published yet. However, this increase in utilization could be a reflection of the increase in availability of ITNs after nationwide distributions in 2006 and 2007.

Reports from 2007 indicate a total of 936 cases of “presumed cholera” that occurred from August to November 2007. No deaths were reported. This represents an improvement from 2006, where 3522 cholera cases were reported with 175 deaths.

The situation of routine immunization has improved considerably in the last few years. Results indicate that the national coverage for fully immunized children is 53% as of October 2007. Pentavalent vaccine (DPT+Hep.B+Hib) was introduced into the national routine schedule in January 2007 and this proved to be very successful with Penta-3 coverage of 66% (drop out rate of 15%) as at October 2007. Similarly, the national coverage for routine BCG is 75%, OPV3 is 66%, Measles is 70%, Yellow fever is 60%, TT2+ (non-pregnant) is 10% and TT2+ (pregnant) is 64%. These figures are expected to go up once the data are updated to November and December.

The high maternal, neonatal and child mortality are linked to the limited number of appropriate health services, both in terms of physical facilities (properly equipped maternity and pediatric wards and Primary Health centers) and in terms of the human resources required (skilled birth attendants and midwives), especially in rural areas, and hence an over-reliance on traditional birth attendants, who are unskilled and who do not make timely referrals for complicated cases.

In 2006 there was a total of 127 physicians (for a total population of over 5 million people; almost half of them being children) with only five obstetricians, 201 midwives and four pediatricians in all of Sierra Leone. Geographical and financial constraints exist also that prevent accessibility to quality obstetric services. The early age at marriage (62% of women aged 15-49 years have married before the age of 18 years), the high

proportion of women who have undergone female genital cutting (94%) and the increasing prevalence of HIV infected pregnant women (4.1%) may be also other contributing factors to high maternal and child mortality.

National data show an overall national HIV prevalence rate of 1.53%. All the factors that facilitate the spread of HIV and AIDS – poverty, illiteracy and harmful traditional practices – are present in Sierra Leone. Access to anti-retroviral therapy is hampered by limited financial resources, poor service delivery and the limited capacity of health workers. Drop out rates between voluntary counseling and treatment is high.

Children in Sierra Leone are exposed to various forms of violence, exploitation, abuse and deprivation of primary caregivers. About 11.3% of children in Sierra Leone are orphans, and 27% are considered vulnerable. This means that these children lack the protection of primary caregivers. The two studies conducted on the situation of orphans and vulnerable children and on child protection in Sierra Leone outlined the very complex and vulnerable environment in which orphans and vulnerable children live. Most of the 11.3% orphans are cared for by relatives and extended family. However, the precarious economic situation of many families and the rampant poverty levels are adding to the burden that these families have to cope with. In the majority of cases, orphans are deprived of their rights to health, education and are more vulnerable to violence, exploitation and abuse.

The alternative care and protection of the large number of children who are not in the care of their parents or extended family is, unfortunately, largely outside the control of the competent authorities in Sierra Leone at the present time. The facilities in which such children are residing are not bound by clear regulations and standards, nor are they subjected to systematic monitoring on the part of the State. This overall absence of State implication and oversight in child protection is a spawning-ground for criminal, illicit and questionable practices. Those can range from bad care practices and entering children into residential care who could also stay with their parents, to such as those encountered in the inter-country adoption and the child trafficking spheres.

Sierra Leone has submitted its second state party report to the International Committee on the Rights of the Child, as well as a report on the Optional Protocols. The review of the report was supposed to take place in September 2007, but it was postponed to mid 2008.

Finally, there were a number of events in 2007 that necessitated a higher alert in terms of emergency preparedness. The unstable situation in Guinea represented a serious risk and the government planned for an influx of refugees. UNICEF was involved in the Government efforts for preparing the emergency response and was identified as lead agency for the water, nutrition and child protection sectors. The parliamentary and presidential elections that took place from July to September 2007 necessitated also some emergency measures, especially as far as field visits and travel up-country were concerned; at certain times, presence of staff at the office had to be reduced to essential staff. The end of 2007 is marked by some instability in the district of Kono, relating to conflict between the management of Koidu holding (one of the largest mining enterprises in Sierra Leone) and the local population. The nature of these events is fairly limited for the time being and no overspill effects are expected.

2. COUNTRY PROGRAMME ANALYSIS AND RESULTS

2.1. Country Programme Analytical Overview

The 2005 Mid-Term Review and the 2006 Annual reviews had recommended two major courses of action for UNICEF supported programme in Sierra Leone:

- The first is the need to focus, converge and scale up integrated programmes around the key priorities for children in Sierra Leone, notably reduction of child mortality and universal primary education.
- The second is the need to make a shift in approaches and directions, moving from an emergency and relief based programme to one aimed at long term sustainable development.

These two recommendations were also echoed in the revised 2006-2007 UNDAF, aligned to the 2005-2007 PRS for Sierra Leone and reflecting the transition from recovery and humanitarian assistance to peace consolidation and development.

The 2007 Annual Work Plans of the various programme components and programme implementation reflected this transition in that:

- The support provided by UNICEF in 2007 was mostly focused around the two key priorities for children in Sierra Leone, notably child mortality reduction and universal primary education. The two programmes of Health and Nutrition and Education were the ones that received the largest portion of funds for 2007.
- Technical assistance for long term government planning was provided by UNICEF in these two areas. Hence, two senior consultants were hired, one for health and the second for education; their main tasks have been the provision of technical assistance and advice necessary to finalize the Education Sector Plan and the Strategic Plan on Reproductive and Child Health. They have been working within the respective line Ministries.
- Widening partnerships through advocacy and resource leveraging: the major actions taken by UNICEF to leverage resources included enhanced UN coordination, which culminated in the formulation of a Joint UN Programme in support of the Reproductive and Child Health Plan; initiation of the Development Partners Groups to harmonize assistance in the areas of health and education; bilateral advocacy and dialogue with development partners for problem solving, alignment and harmonization, and; extensive fund raising for these two areas through the UNICEF channels, notably the UNICEF National Committees and some governments that have expressed interest in funding work on MDGs in Sierra Leone.
- Increased national ownership: in all UNICEF supported programmes, emphasis was made in 2007 to ensure that the Government is in the driver's seat. In many instances, this meant slower pace of progress, especially in the area of child protection. But it is believed that such an approach is the only one that will generate sustainable results for children.
- Engaging in active policy dialogue: this is in line with upstream focus of the UNICEF interventions. The policies related to management of malnutrition could be mentioned as just one example.
- Understanding better the situation of children: this is essential if one is to start looking at children's issues that require long term interventions. In this regard, 2007 has witnessed the initiation of a number of studies around issues such as young infant feeding practices, FGC, and children in alternative care. Appropriate programme interventions focusing on behavioral change and on building long term capacity of government to manage these issues will follow. MICS 3 was finalized and launched in 2007.
- Focus on capacity building: though this was not done to the extent desirable, some actions were started in this direction

There were only few major activities from the 2007 AWP that could not be completed. These include two studies on out-of-school children and on child marriage and its relation to girls' education. No progress was made as well on defining a way forward on birth registration and phasing out the current forms of support that UNICEF is providing in this area. Also, although extensive discussions took place at the level of the office and to a certain extent with the Ministry of Social Welfare, Gender and Children' Affairs, no progress was made on identifying effective strategies for building the capacity of this Ministry in the area of child protection. The reasons for the lack or limited progress in these areas include inability to identify suitable consultants, confusion in responsibility and accountability for these areas within ministries and government bodies, limited technical capacity within Government to engage in a dialogue around these issues and perhaps limited capacity or lack of adequate time amongst UNICEF staff to engage in this type of dialogue.

Results based management was emphasized as the most effective means for programme development, including in collaboration with sister UN agencies. Hence, results based management was used as the foundation for the development of the two UNDAF priorities in which UNICEF took the lead role, notably

child and maternal health and education. UNICEF organized a number of meetings with UN colleagues involved, and presentations were made on the results based management approach to programming, followed by concrete application through development of the UNDAF outcomes and outputs. Results based management was also introduced to all programme staff of UNICEF, through a training session, followed by a hands-on exercise that involved the development of the results matrices for each of the three programmes included in the 2008-2010 country programme. This has facilitated immensely the preparation of the 2008 AWP, as it was a logical flow from the three year matrices developed earlier.

The main facets of success in gender mainstreaming worth mentioning include the advocacy and programmatic attention given by UNICEF this year to child marriage and to FGC. Although advocacy work was done around girls' education, it is not entirely true to state that appropriate strategies have been developed for promotion of girls' education. In fact, the situation with regard to gender issues is complex at several levels. At the level of the country itself, inequality in gender relations and the discrimination against girls and women is substantive and needs to be further understood through cultural studies that look at beliefs, practices and values. At the level of the Government, some ministries may have gender focal points, but they are not provided with the necessary tools of work, and are often quite isolated and marginalized. Some ministries like the Ministry of Social Welfare, Gender and Children's Affairs have a gender directorate, but located physically away from the main ministry, hence making it virtually impossible to benefit from any interaction with the rest of the Ministry. At the level of the UNCT, there is only one organization that addresses gender issues openly, namely UNIFEM, but it is seriously understaffed (two staff members only). All these elements make addressing gender issues also within the context of the UNCT more difficult. It is very clear there that leadership is lacking, and UNICEF is not ready at all to handle this responsibility in a country like Sierra Leone where the comparative advantage of the organization lies in focusing on child survival and education.

UNICEF while working in collaboration with UNCT faces great challenge in strengthening national monitoring and evaluation capacity in the country. There is general agreement to support a national database on socio-economic and development indicators in the country under the direction of the National Statistics Office, but agencies still prefer to handle the relation with Statistics Sierra Leone on a bilateral basis; also, while some agencies have expressed interest to support these activities, no concrete action took place. Finally, not all UN agencies have a monitoring and evaluation officer or focal point, which makes also coordination among agencies in the area of monitoring and evaluation difficult. One window of opportunity exists at present however with the Joint work that the UN is doing on DHS. UNICEF is represented on the national and technical steering committees for DHS and has made significant technical input into the preparatory phase.

The 2007 AWP, especially in Health and Nutrition and in Education were still very much supply driven. While there are no prospects that this will cease to be the case in 2008 and onwards, it is expected that there will be better balance between the supply interventions/inputs and other programmatic inputs. An important area of focus in the 2008-2010 programme will be building the supply management capacity of Government counterparts. Also, it is expected that once the implementation plans of the Education Sector Plan and the Reproductive and Child Health Plan are finalized, UNICEF may be called upon to provide reimbursable procurement services.

Several communication channels were used in 2007 to advocate for the child related MDGs and the UNICEF 2007 programme. A robust Media Strategy was developed and implemented to enhance public visibility and create awareness on pertinent issues in child survival, protection and development. An upsurge of newspaper and radio establishments was observed over the past 12 months, each with its own peculiar focus. In order to keep pace with the plethora of publications, a daily press preview was initiated in order to monitor how the media responds to children's issues and to highlight key issues. A tracking mechanism on the production and airing of radio programmes was developed. These involved programme content, airing times and audience. In order to make technical inputs into the programme contents, media backgrounders on programme issues were developed and shared with relevant radio TV stations. The media backgrounders also focused on information

sharing on key media events. Monthly meetings for technical support to the production of programmes on radios including the Voice of Children, was undertaken.

The media was also involved in a number of field trips such as the “Girl Tell Us” campaign, HIV/AIDS pre-conference sensitisation in the regions, the district level consultative meetings on the Child Rights Act as well as coverage of special events such as the Maternal and Neonatal Tetanus Elimination (MNTE) Campaign, the handing over of the WASH facilities supported by the Japanese Government in Kono, Koinadugu and Bombali Districts and the official inauguration of Kabala Maternity Ward.

During 2007, UNICEF office hosted international media from Luxembourg, Spain, German, Iceland and Belgian NATCOMS. Several visits of good will ambassadors were also hosted in 2007: a visit of the Belgian NATCOM accompanied by the Goodwill Ambassador Axelle Red in September and a visit of Bai Kamara, a Sierra Leone born singer based in Belgium, who is also a youth ambassador in November. The country office also facilitated a visit of Richard Lee and team from the UNICEF Media hub in South Africa produced two video spots for Sierra Leone covered by the UNICEF web on Child survival with specific focus on malaria and girls education.

A total 18 human interest stories, 24 photo notes, 23 press releases and 12 media backgrounders were shared with the UNICEF web, UNICEF Panorama magazine, Relief Web and other related websites, international and local media, including radio and TV. Three feature stories were shared with the local media. These contributed to excellent media coverage in both the national and international media. Internationally, the country office was commended as leading the top five country offices in terms of relations with in coverage this year with almost 500 articles with UNICEF mentioned.

2.2. Report on Progress and Results in Country Programme Components

2.2.1. COUNTRY PROGRAMME COMPONENT: HEALTH AND NUTRITION

Main 2006-2009 MTSP Focus Area Addressed: FA1

Main MTSP Key Results Areas Addressed: FA1 – KRA1; FA1 – KRA2

a) Purpose of the Programme Component

The aim of the Health and Nutrition Programme is to assist the Government in achieving the MDGs 4, 5 & 6 set for the reduction of under-five and maternal mortality; and combating HIV/AIDS, Malaria and other diseases in Sierra Leone. The programme is in line with pillar III of the PRSP – promotion of human development; the programme is in line with outcomes 3 and 4 of the 2006-2007 UNDAF – Improved health for all citizens, in particular women of child bearing age and under five children and intensified response for HIV/AIDS prevention care, and support respectively. The results set for the programme in 2007 included: i) reduced malnutrition and micronutrient deficiencies among under five children; ii) proportion of children and women who are fully immunized and who receive Vitamin A supplementation is raised to 80%; iii) prevalence of malaria, diarrhea and pneumonia among under five children is reduced; iv) proportion of women who are attended by trained and skilled personnel during antenatal, delivery and post natal care is increased to 80%, and; v) quality of referral and management of obstetric emergencies is improved in 374 PHUs. The programme has one consolidated AWP that includes four projects.

The main partners of the Health and Nutrition programme include the Ministry of Health and Sanitation (MOHS), the Ministry of Education, Youth and Sports (MEYS), and the Ministry of Social Welfare, Gender and Children’s Affairs (MSWGCA). Close collaboration is also made with the District Health Management Teams and the District Medical Officers. UN agencies, notably WHO, UNFPA, WFP and UNAIDS are also close partners, as well as international and national NGOs, local communities, donors and the private medical sector.

b) Resources Used

	RR	OR	RR for OR	7% Global Aside	RR Set	Thematic funds	Total amount
Approved budget in the AWP for 2007	\$ 437,000	\$ 907,500					\$ 1,344,500
Available budget in 2007	\$ 1,246,087	\$ 5,540,560	\$ 1,809,291	\$ 189,800	\$ 570,132		\$ 9,355,870

The main donors to the Health and Nutrition programme and their contributions are listed below:

Donor	Amount in US dollars
Italian Committee for UNICEF	1,085,624
German Committee for UNICEF	121,032
Canada/CIDA	167,777
Japan	1,829,901
US Fund for UNICEF	1,159,289
Polish Committee	692,654
DFID	59,620
UK Committee for UNICEF	147,105
GAVI	223,005
UN Foundation	54,508
TOTAL	5,540,560

c) Results Achieved

UNICEF continued to advocate throughout 2007 for mobilization of counterparts and partners and leveraging of resources around child and maternal mortality reduction. An important result of this advocacy is the success achieved by the development of Reproductive and Child Health Strategic Plan 2008-2010. The Plan was presented to the key actors in the health sector and to development partners in early December 2007. The Plan explicitly aims at saving the lives of women and children through evidence based high impact interventions. Key messages that permeate from the plan are strong political will and commitment, effective leadership by the Ministry of Health and Sanitation (MOHS), international donor harmonization and effective and efficient decentralization. A draft costing plan is also ready. It is expected that the Plan will be officially launched at the end of January 2008.

Another important result of the advocacy carried out by UNICEF is the allocation by the World Bank of a 30 million US dollars grant from the African Catalytic Growth Fund. The funds were disbursed in the second half of 2007; part of these funds went to support the district level health plans. The strong advocacy done by UNICEF around the package of high impact interventions to accelerate child survival led to the adoption of this package as a foundation for the district level plans funded by this World Bank grant, and UNICEF has provided extensive support for the development of these district level plans.

In the spirit of UN reform and aid harmonization, a Joint UN Programme was developed in support of the Reproductive and Child Health Strategic Plan (to start in 2008). The participating agencies in this Programme are so far UNICEF, UNFPA and WFP, with the possibility of other UN agencies joining later. The participating agencies selected UNICEF as the Administrative Agent for the funds received for this Joint Programme. Irish Aid has already contributed 1 million Euros into this joint account in mid December 2007. It is expected that more funds will be channeled in 2008 through the joint account, including from DFID, Irish Aid and other donors.

Last but not least, UNICEF has succeeded in incorporating child maternal health as one of the five priorities of the 2008-2010 UNDAF, with focus on reduction of child and maternal mortality.

Other key results achieved by the Health and Nutrition programme are the elevation of nutrition on the political agenda and its incorporation as a central pillar in the Reproductive and Child Health Strategic Plan. The long awaited National Protocol for the Integrated Management of Acute Malnutrition—emphasizing the community-based approach in dealing with the high level of malnutrition in under-five children - was adopted by the Ministry of Health in 2007, following intense advocacy and technical support from UNICEF.

Specific results achieved

As indicated above, nutrition was placed high on the political agenda during 2007 and was included as a central pillar in the Reproductive and Child Health Strategic Plan 2008-2010. The long awaited National Protocol for the Integrated Management of Acute Malnutrition (emphasizing the community-based approach) was reviewed and adopted by the Ministry of Health and Sanitation. In the context of efforts to ensure that the protocol is followed, training was organized for 65 senior health staff from NGOs and 30 health staff working in peripheral health units (PHUs) on the newly adopted Protocol; the trainees work throughout the 13 districts of Sierra Leone. Through this training, it has become possible to provide quality therapeutic feeding to those children who need it.

Delivery of nutrition services was improved also through the provision of nutrition equipment, reporting forms and logistic support in the form of transportation costs for health staff from PHUs to undertake nutrition status surveillance of under-five and growth monitoring and promotion in the PHUs and the surrounding communities. Women groups and community volunteers were also supported to provide nutrition education, counseling sessions and growth monitoring promotion activities at the community level. Results indicate that among the children screened in the PHUs, 12.7% were found to have moderate malnutrition (70-79% W/H) and 4.5% had severe malnutrition (<70 W/H)¹. Children with moderate malnutrition were treated in WFP supplementary feeding programs, while those with severe acute malnutrition were referred to the hospitals' therapeutic feeding centers (TFCs). A total of 3,294 children were referred to 7 therapeutic feeding centers nationwide. Among these, 96.2% were successfully rehabilitated.

Several activities were conducted for the promotion of early and exclusive breastfeeding. These included awareness raising sessions directed to parents, communities and women groups. Special promotion activities were organized on the occasion of the World Breastfeeding Week and about 80,000 women have benefited from the activities organized in the 13 districts. Certificates of Recognition were awarded to 160 lactating mothers who participated in the World Breastfeeding Week Baby Show Competition. Each of 100 exclusively breastfed babies from the 13 districts were awarded golden bows. In addition, a training of a core group of 50 national trainers on infant and young child feeding (emphasizing feeding options for HIV positive mothers) was conducted in collaboration with the HIV/AIDS Section and the Ministry of Health and Sanitation. Data from health facilities show rates of early and exclusive breastfeeding at 31.4% and 47.2%, respectively. However, these rates should not be interpreted as representative of the general population. In a bid to better understand the practices and determinants of breastfeeding in Sierra Leone, UNICEF supported a national study on knowledge, attitudes and practices with respect to infant and young child feeding. The report of the study is currently being finalized; however, preliminary results indicate that there are several barriers at the cultural level, as well as misconceptions that need to be addressed to effect the increase necessary in exclusive breastfeeding rates. The results of the study will be used for developing appropriate programme communication activities geared at behavioral change among women, families and the communities at large.

In terms of addressing micronutrient deficiencies, two rounds of de-worming among 2-5 year old children were carried out in conjunction with the national Maternal and Neonatal Tetanus immunization and vitamin A campaign nationwide in April and November 2007. Coverage was 94.1% in the first round and 88.4% in the

¹ These rates should not be treated as representative of the general population.

second round. Coverage levels exceeding 80 per cent were achieved in the two rounds of vitamin A supplementation to children between 6 and 59 months of age (84.2% in first round and 98.4% in second round). Routine vitamin A coverage for children 6-59 months was however low (22.4%). Postpartum vitamin A coverage was well below 50 per cent (23 per cent) due likely to the low proportion of deliveries assisted by skilled birth attendants. Efforts need to be focused next year on identifying community-based distribution channels for postpartum Vitamin A (such as TBAs) and on strengthening routine administration of Vitamin A.

The prevention of anemia in primary school age children (6-14 years) was done through mass administration of deworming tablets (mebendazole). This activity was conducted in collaboration with the Ministry of Health and Sanitation, the Ministry of Education and the World Food Programme: a total of 549,895 children were targeted; of those, 98% were reached in 9 districts.

To achieve universal salt iodization (USI), several sensitization and promotional activities to promote consumption of iodized salt were conducted among communities and salt producers in 2007. Test kits were provided by UNICEF to determine the iodine content of salt consumed by pregnant women attending PHUs. These tests show that 56.6% of the salt had iodine content above 15 ppm (required), 21.6% had iodine content less than 15 ppm and 20.7% had no iodine. These results should also not be interpreted as representative of the general population, but as indicative of some improvement in terms of using iodized salt. Persistent action is required however to achieve the USI target of 90% of households consuming adequately iodized salt. A national assessment of the Salt Iodization situation in Sierra Leone was conducted in partnership with Micronutrient Initiative in November 2007. Preliminary results from the assessment point at the need to: introduce relevant legislation; set up a regulatory framework for salt importation; ensure closer monitoring, and; developing appropriate technology for iodization of the locally produced salt.

In terms of immunization, UNICEF and other partners supported the Ministry of Health and Sanitation to introduce the Pentavalent vaccine (DPT+Hep.B+Hib) as a new vaccine in the national routine immunization programme to replace DPT. This was successfully accomplished in January 2007 and Penta-3 coverage reached 66%. The national immunization coverage for full immunization in children one year of age is 53% while TT2+ in pregnant women it is 64% and 30% in non-pregnant women (figures taken from routine reporting system on vaccination coverage).

UNICEF, WHO and other partners provided technical support in the planning, implementation, monitoring and evaluation of a national Maternal Neonatal Tetanus Elimination Campaign in April, May and November 2007. The integrated campaign included Tetanus immunization, Vitamin A supplementation and de-worming. The coverage for three interventions was above 80% for children under-five, and women of child-bearing age received at least two doses of Tetanus Toxoid during three rounds of the campaign.

In terms of maternal health and safe motherhood, works on the maternity ward in Koinadugu district were completed; this led to an increased capacity of the maternity ward from 5 beds to 50 beds. The maternity unit is linked to 11 Peripheral Health Units (one in each of the chiefdom headquarter towns of the district of Koinadugu) through HF radios that are solar powered and an ambulance that is also equipped with a mobile HF radio. The results obtained so far indicate that 235 admissions and 188 deliveries took place at this maternity ward over a period of five months (July to November 2007). More efforts will be made during 2008 to increase the demand for the services provided at the newly constructed maternity ward. Awareness raising and sensitization will be done among mothers, families, communities and health workers about the existence of this maternity ward and the need to refer the complicated deliveries for appropriate care.

Antenatal care and promotion of the importance of deliveries assisted by skilled birth attendants is also part of the integrated package of services provided in PHUs. UNICEF contributed to increasing access to PMTCT services by providing training for 60 health personnel and 270 MCH Aides and 965 TBAs on PMTCT.

UNICEF's support to strengthening health care services at district level included provision of drugs and medical supplies (including drugs and equipment on Basic Emergency Obstetric and Neonatal Care) and training of staff in 428 PHUs present in the six focus districts of UNICEF (Kono-70, Bombali-85, Koinadugu-52, Pujehun- 49, Kenema-109 and Kailahun-63). Training focused on key child survival and maternal health strategies including antenatal care, case management of malaria, acute respiratory infections and diarrhea. The PHUs covered through this intervention represent about 46% of the functioning PHUs countrywide.

UNICEF has closely and intensively supported the process of district level planning to ensure an effective use of the World Bank Grant for accelerated child survival, as indicated earlier. UNICEF also made sure that District Health Management Teams were on board and fully participated in the preparation of the Reproductive and Child Health Strategic Plan. A training workshop was organized also for the District Medical Officers in one of the districts on the use of the Marginal Budgeting for Bottlenecks tool in health planning.

Results indicate that during 2007, a total of 499,683 patients were treated for various ailments including 196,996 under-five children, compared to 147,786 under-five children treated last year. The increase in the number of children referred for treatment is an indication of the more expansive policy on behalf of the PHUs, who are actively reaching out into the communities around them.

In terms of strengthening the capacity of the districts to address malaria specifically (for its being the major killer of children in Sierra Leone), a total of 285,659 Long Lasting ITNs were distributed to beneficiaries in Bombali, Koinadugu, Kono, Kailahun, Kenema and Pujehun districts. The results in terms of malaria prevention are encouraging. Hence, district morbidity reporting for 2007 indicate a total of 71,767 under five children treated for malaria in the six supported districts compared to 221,543 in 2006. A survey conducted at the end of 2006 by CDC Atlanta and HealthBridge Canada in collaboration with the Ministry of Health and Sanitation, following the integrated malaria measles vitamin A campaign (November 2006) indicated that 56.1% and 49.7% of under five children and pregnant women sleep under an ITN respectively. This increase is a reflection of the impact that an increase in the availability of ITNs could have on malaria incidence.

Critical factors and constraints affecting performance

- **Human resources for health:** although there is a reasonable increase in the number of health facilities nationwide (939 in 2007 as compared to 859 in 2006), problems still persist with regard to availability of adequately trained health staff and a 'reasonable salary scheme' for the health staff working in those facilities. The issue of retention of the health staff currently in PHUs is addressed in the newly drafted Reproductive and Child Health Strategic Plan. It is expected that concrete actions for retention of health staff are implemented over 2008.
- **Users' fees for health services:** unaffordable treatment costs, bad road conditions and high transportation costs continue to deny communities access to utilization of health services. Although the Ministry of Health and Sanitation has been holding onto the idea of providing free health services to children under five years of age, pregnant and lactating women, there is no written policy to this effect, and its application at the field level leaves much to be desired. A clear position will need to be taken on waiving users' fees for health services not only for the earlier mentioned categories, but also for orphans and vulnerable children, and those affected by HIV/AIDS.
- **Monitoring and reporting:** the Health Information System (HIS) is very weak at both national and district levels. Tools and training available for monitoring and evaluation at district level are inadequate and quality of data collected is therefore questionable. The different reporting obligations that district health teams and PHUs have to adhere to, as required by the different donors that support them add to the complexity of monitoring and reporting.
- **Decentralization:** while the decentralisation efforts by Government and the devolution of authority to district level are ongoing, there is a clear indication that some districts are not yet able to assume the responsibilities required from them; this has a negative impact on the delivery of health services in those districts.

Monitoring, study and evaluation methods

A national study on knowledge, attitudes and practices with respect to infant and young child feeding was conducted in October - November 2007. The main objective of the study is to help understand the knowledge, attitudes, behaviors and practices surrounding infant and child feeding among individual caretakers, communities and health workers in Sierra Leone in order to plan and implement necessary actions to improve them, especially programme communication activities and training of health personnel. The results of the study are currently being analyzed and a final report is expected by end January 2008.

In November 2007, also a national assessment of the Salt Iodization situation in Sierra Leone was conducted in partnership with Micronutrient Initiative, the Ministry of Health and Sanitation and the Standards Bureau. Preliminary results have already been mentioned earlier in the report. However, a final report is expected by end January 2008 and will guide programme interventions in this area during the period 2008-2010.

An evaluation of the UNICEF supported interventions for malaria prevention and response was planned for 2007, but has to be re-scheduled for 2008, because of time constraints.

Key partnerships and interagency collaboration

UNICEF's key partner in Health and Nutrition is the Ministry of Health and Sanitation (MOHS) at national level, and the District Health Management Teams at district level. Other key counterparts/partners include among the UN agencies WHO, WFP, UNFPA and UNAIDS, donors and among NGOs, World Vision, Sierra Leone Red Cross Society, Catholic Relief Service, and others. Close collaboration is also made with the private medical sector and the National AIDS Secretariat.

In terms of building partnerships for child survival and maternal mortality reduction, key partnership forums were established in 2007, including: National Health Policy Advisory Group (NHPAG) chaired by the Minister of Health and co-chaired by UNICEF, in charge of policy and strategic planning, monitoring and evaluation; National Steering Committee for Child, Sexual and Reproductive Health, a technical committee chaired by the Ministry of Health and Sanitation, with membership of UN, development partners, INGOs and NGOs, in charge of developing the national strategic plans and policies on child and maternal mortality reduction for review, endorsement and adoption by the NHPAG, and; Health Development Partners group, co-chaired by UNICEF and DFID for coordination and aid harmonization among donors and development partners and for technical support to Government.

UNICEF also continued to play, in 2007, a leading role in the ICC and the Country Coordinating Mechanism (CCM), coordinating bodies for immunization and Global Fund for Malaria, TB and HIV/AIDS respectively.

d) Future Work plan

Priority actions planned for 2008

The programme focus in 2008 will be largely in terms of contributions for implementation of the Reproductive and Child Health Strategic Plan. UNICEF will maintain its role in terms of advocacy and resources leveraging for reduction of child and maternal mortality. In particular, emphasis will be on supporting aid harmonization and coordinated action among UN and NGOs around the Strategic Plan. Advocacy, resource leveraging and harmonization for health are critical to be able to bring the Plan's interventions to national scale, as it is widely acknowledged that no agency or ministry alone can do that. The UN Joint Programme in support of the Reproductive and Child Health Plan will be an excellent opportunity for streamlining support to Government and avoiding overlap and duplication of efforts.

UNICEF will also support the development of a national programme communication plan focusing on behavioural change relating to key practices that will lead to a reduction in child and maternal mortality. UNICEF's role in this regard will be to support Government to build a national consensus around the key practices that need to be addressed and help develop and implement the appropriate programme communication plans.

Specific adjustments planned for 2008

Interventions that have so far been included under the Health and Nutrition programme will be incorporated, starting in 2008, as two of the components of a wider Child Survival and Development programme. Two other components for this wider Child Survival and Development programme will be Water, Sanitation and Hygiene and HIV/AIDS. This change is based on lessons learned from the past about the need to converge and develop an integrated programme around the key priorities for children in Sierra Leone, in this case reduction of child mortality and improved maternal health. Each of these four components will be headed by an international professional working with a team of specialists.

Another adjustment is that the Child Survival and Development programme, like the entire 2008-2010 UNICEF country programme, will no longer have a geographical focus or target specific districts. In fact, the programme will have a national character in that UNICEF will support capacity-building of government counterparts and civil society, formulation or strengthening of policies and guidelines and implementation of such national programmes as immunization, deworming and vitamin A supplementation. In a limited number of geographic regions with poor social indicators for children, sectoral programmes will converge to assure greater impact with limited resources and allow for innovation and modeling that could be replicated or taken to scale with the Government's own or external resources.

Resources available and funding gaps

Given the priority of action on reducing child and maternal mortality, the Child Survival and Development programme will have the largest portion of RR funds over the next three years of the new country programme (2008-2010). An amount equivalent to 2.6 million US Dollars from RR funds will be allocated to this programme annually for the next three years. In terms of OR, the target is 5.0 million US Dollars for the Child Survival and Development on yearly basis. The funds available so far for 2008 amount to about 4.0 million. A gap of about 1.0 million US Dollars therefore exists for 2008. For 2009 and 2010, no OR funds are available or pledged at the time of writing this report.

2.2.2. COUNTRY PROGRAMME COMPONENT: EDUCATION

COUNTRY PROGRAMME COMPONENT: EDUCATION

Main 2006-2009 MTSP Focus Area Addressed: FA2

Main MTSP Key Results Areas Addressed: FA2 – KRA2; FA2 – KRA3

a) Purpose of the Programme Component

The aim of the Education Programme is to improve access, retention and completion of quality primary education for all girls and boys. The programme contributes to Sierra Leone's thrust towards achieving the Millennium Development Goals 2 and 3 on universal primary education and gender equality. It is also in line with the country's pillar III of the PRSP for the promotion of human development. The planned results set for the programme in 2007 included: i) successful appraisal and endorsement of the country's Education Sector Plan, ii) increased pupil enrolment by 60,000; iii) learning materials provided to 271,364 children in both formal and community schools; iv) teaching materials provided for 5,728 teachers; v) 600 teachers trained under Sababu project; vi) 80 community schools upgraded to meet child friendly standards; and vii) 500 girls awarded prizes for high academic performance. The programme has one consolidated AWP with three projects.

The main implementing partners include the Ministry of Education, Youth and Sports (MEYS), District Education Units and Local Councils, sister UN agencies notably WFP and UNESCO, donors, international and national NGOs, and communities.

b) Resources Used

	RR	OR	RR for OR	Thematic funds	Total amount
Approved budget in the CPD	\$ 527,000	\$ 877,500			\$ 1,404,500
Available budget in 2007	\$ 1,931,663	\$ 1,229,365	\$ 71,550	\$ 1,038,673	\$ 4,271,251

The main donors for the Education programme in 2007 are the Swedish National Committee for UNICEF, the Iceland National Committee for UNICEF, the Government of the Netherlands, the World Bank and DFID. The table below lists the major donors and their contributions to the Education programme.

Donor	Amount in US dollars
Iceland National Committee for UNICEF	60,346
Government of Netherlands	429,700
DFID for a project on orphans and vulnerable children	123,731
Swedish National Committee for UNICEF	457,417
World Bank	158,151
TOTAL	1,229,365

c) Results Achieved

UNICEF has continued to play in 2007 its role of advocacy and resource leveraging for education in Sierra Leone. With the Minister, UNICEF co-chaired the regular in-country donors meetings created to endorse the country's Education Sector Plan (ESP). The Plan was successfully appraised and endorsed by the Development Partners. In June 2007, the UNICEF Representative attended a high level meeting, organized by the FTI Secretariat, with key education partners and international donors in Bonn. The advocacy made by UNICEF at that meeting led to the allocation of 13.9 million US dollars from the EFA FTI Catalytic Fund and the establishment of a pooled funding mechanism to receive incoming funds.

The advocacy done by UNICEF resulted also in higher political commitment by the Government to education. There is renewed Government commitment to education, expressed by both the President and the line Minister concerned.

Another key result in 2007 has been the continued and even closer coordination with the World Bank, DFID and the African Development Bank. This has led to a joint mission in October – November 2007 to review the progress achieved in the ESP implementation. UNICEF co-chairs with the Ministry of Education, Youth and Sports the Education Development Partners group.

Other important results include an agreed set of standards for school construction in terms of design and measurement in collaboration with the Ministry of Education (MEYS). A functioning technical team has been established in the MEYS to carry out regular inspection visits to school construction sites for monitoring these standards and improving quality.

Specific results achieved

Activities relating to girls' education were implemented by the Sierra Leone Girls Education Network (SLEGEN). Three activities were implemented, namely: Gender awareness regional workshops: Girls Tell Us Forum, which is a dialogue with in- and out-of-school girls in three districts on issues affecting their access, retention and completion of basic education, and; Girls Education Week, observed to create awareness on the issues affecting girls' retention, performance and completion of basic education and also to seek assistance

from communities to help address the girls' problems. The hallmark of the Girls' Education Week was the award ceremony during which educational prizes in the form of scholastic materials were awarded to highly performing girls in upper primary school. This year's ceremony has shown a marked increase in the number of beneficiaries (almost doubled since last year from 258 to 500). The programme was so successful this year— with more girls performing well – due to sensitization activities and communities instituting and enforcing bye laws in support of girls' education.

In a bid to promote sensitization of families and communities on the importance of girls education, 20 mothers clubs have been established as innovative pilot projects in Bombali and Kono districts to empower women/ mothers into becoming strong advocates for girls education at both family and community levels and taking full responsibility for the education of their children. Training was also conducted for members to facilitate information sharing to other community members on various issues such as HIV/AIDS, exclusive breastfeeding, immunization, hygiene, child marriage and sexual abuse.

In support of increasing access of children in remote communities to education, 50 communities were supported to upgrade already existing schools to meet child friendly standards; this included construction of classroom blocks including safe water well, separate latrines for girls and boys, outdoor playing materials and adequate furniture for pupils and teachers. Learning materials were provided for 131,000 pupils and teaching materials for 3,530 teachers. . Training was organized for 780 members of School Management Committees (SMCs) (240 females) in 90 schools and have resulted in greater community ownership of schools encouraging community members to provide local materials and labour on construction sites; community sensitization on the importance of education has resulted in more children being sent to school after classroom rehabilitation or construction has been completed.

In the area of teacher training, a total of 768 teachers (including 186 females) underwent in-service training. The teachers acquired enhanced skills in pedagogy including the adoption of child-centred and participatory learning approaches. Other trainings that took place were for de-worming (2,000 teachers/ community members trained and 120,000 children de-wormed in collaboration with MEYS, MOHS and WFP), OVC issues (204 teachers trained), 2,000 teachers on HIV/AIDS education and life skills, 660 teachers on school sanitation and hygiene education (SSHE), sports (20 teachers trained in Bombali and Kono) and inclusive education (40 teachers trained on disability issues in the district of Bombali).

UNICEF has initiated, in coordination with the Ministry of Education, Science and Technology (MEYS), the formation of a Task Force for the Enrichment of the Teacher Certificate Curriculum (TCC) and the Primary School Curriculum (PSC). This Task Force comprises the principals of the Primary Teacher Colleges (TCs) and the Ministry of Education officials, including the examiner body and the National Curriculum Development Center (NCDC). The Task Force has already identified issues for consideration in the teachers' training curricula and named them "emerging issues". This activity will be continued in 2008, as it is part of UNICEF's intervention to improve the quality of teaching.

To strengthen the education planning, coordination, monitoring, supervision and inspection of schools logistical support has been provided at the national, district and community levels. A total of 24 motorbikes and 7 vehicles were provided by UNICEF to district education offices in the districts of Bombali, Kono, Pujehun, Koinadugu, Kenema, Kailahun and Freetown.

Critical factors and constraints affecting performance

Although considerable progress was made by UNICEF's support towards increased access, equity and quality of education provision, there are still many constraints that need to be addressed if universal primary education of quality is to be achieved in Sierra Leone:

- ***Limited technical capacity of the Ministry of Education***, at both central and district levels, especially in the areas of planning, monitoring and evaluation and in terms of coordination with NGOs and with other ministries.

- ***Hidden costs of education:*** although there is a government decision to waive school fees for primary education, there are many hidden costs of education that have to be borne by parents, and which in many cases are barriers for sending children to school. These include transportation costs, costs of textbooks, school uniforms and other costs.
- ***Quality of teaching:*** this is a complex issue and has many aspects. About 40% of teachers in primary education are unqualified and untrained; the salaries of teachers are very low and consequently not motivating; data about the number of teachers and their geographical distribution is not available; the policy of the government towards teachers recruitment is confusing, especially given the IMF restrictions; and finally; the government does not have a clear vision on how to increase the number of teachers and on their training (both pre- and in-service).
- ***Rising cost of construction supplies and difficulties in identification of suitable partners:*** this has been especially faced with regard to the construction of community schools; as a consequence the 50 community schools to be constructed in 2007 could not be completed.

Monitoring, study and evaluation methods

The Government's Education Sector Plan was appraised and FTI-endorsed by the in-country donors in March 2007. A joint education monitoring mission with the World Bank, the African Development Bank and DFID to follow up ESP issues took place in October/ November 2007. The mission was very positive and will be repeated next year to look at the progress done in ESP implementation.

Following the evaluation of the CREPS project which was conducted in early 2007, and with the advice of the Ministry of Education, most CREPS classes, together with their teachers, have been merged into the regular formal host schools. UNICEF is therefore no longer providing support to CREPS classes.

One recommendation from both the ESP appraisal and the CREPS evaluation was that there should be a further study on out-of-school children to find the extent of the problem and identify relevant interventions. The groundwork for this study has been laid and the research itself is slated for early 2008.

Another study had been planned in conjunction with the Child Protection programme on child marriage and its relation to girls' education. However, it has not been possible to find a suitable candidate who could design and implement this study and therefore it has been deferred to 2008.

Key partnerships and interagency collaboration

The counterpart of UNICEF in the area of education is the Ministry of Education, Youth and Sports (MEYS) at national level, and the district education units at district level. Other partners include the World Bank, African Development Bank, DFID, Irish Aid, EC and JICA. Key UN and NGO partners include WFP, Plan International, Save the Children UK, Cause Sierra Leone and FAWE. The Education In-Country Donors Group was transformed at the end of 2007 into an Education Development Partners Group with UNICEF as chair.

d) Future Work Plan

Priority actions planned for 2008

The 2008 education programme will continue to support the Government's Education Sector Plan and its contributions will be largely along the lines of the ESP. Emphasis will be on the following strategic directions:

- Leveraging and harmonisation of resources through the Development Partners Group and through UNICEF's own advocacy channels
- Development of strategies and activities for tackling all equity issues, including girls education and reaching out-of-school children
- Teacher training is one of the areas where UNICEF will continue to position itself. In particular, it will keep up its thrust of institutionalizing teacher training by working through the universities and colleges. This is a strategic intervention that will lead to the availability of qualified teachers and build up the capacity of national institutions. The need for many more female teachers is an especially

urgent priority. A harmonized teacher training programme will be jointly embarked upon with MEYS, the World Bank, UNESCO and other partners and will include the enrichment of the Teachers Certificate Curriculum with “emerging issues”

- Development and implementation of norms and standards for child friendliness in school construction, including those related to availability of water and separate sanitation facilities for girls and boys

Specific adjustments for 2008

An important change for the Education programme in 2008 is that it will no longer be focused only on education interventions, but will include also two other components, notably Water, Sanitation and Hygiene and Child Protection. This is based on lessons learned from the past about the need to converge and develop an integrated programme around the key priorities for children in Sierra Leone, in this case increased access, retention and completion of education.

As lead education agency, UNICEF has helped the Government and Development Partners set up an education sector pooled funding mechanism for supporting the ESP. UNICEF must decide in 2008 whether to join in and help kick-start the process by adding its own funding contribution to the basket – an innovation which would greatly reinforce its role as lead donor.

UNICEF also needs to consider whether it will go into basic education since this is an avenue where great gains could be made in girls’ education and gender equality. International assistance for the education sector beyond primary education remains low in Sierra Leone.

Resources available and funding gaps

The RR funds available to the Education programme in 2008 are equivalent to \$ 2,500,000 and for every year up till 2010. For 2008, the Education programme has already 988,256 US Dollars at its disposal out of the OR planned amount of US 4,000,000 Dollars. The funding gap for OR is therefore US Dollars 3,011,744 for 2008. No OR funds are available or have been pledged for 2009 and 2010.

2.2.3. COUNTRY PROGRAMME COMPONENT: ADOLESCENT HIV and AIDS PREVENTION

Main 2006-2009 MTSP Focus Area Addressed: FA3

Main MTSP Key Results Areas Addressed: FA3-KRA 1, FA3-KRA2, and FA3-KRA3

a) Purpose of the Programme Component

The aim of the Adolescent HIV and AIDS Programme is to contribute to the reduction of the spread of HIV and AIDS and mitigate its impact on individuals, families and communities in Sierra Leone. The programme is in line with pillar III of the PRSP – promotion of human development; the programme is also in line with outcomes 3 and 4 of the 2006-2007 UNDAF – Improved health for all citizens, in particular women of child bearing age and under five children and intensified response for HIV/AIDS prevention, care and support respectively; the programme serves to support Sierra Leone in its efforts to reach MDG 6 on HIV/AIDS. The results set for the programme in 2007 included: i) Children and HIV and AIDS issues mainstreamed into national policies and plans, including policy on OVCs and national policy and plan on child survival and maternal mortality reduction; ii) Life skills based HIV education taught in schools as a component of the school curriculum; iii) PMTCT and Paediatric care services provided and monitored by national health care providers through routine health services. The programme has one consolidated AWP that includes three projects.

The main implementing partners include the National AIDS Secretariat (NAS), UNAIDS, UN Theme Group on HIV/AIDS, MEYS, MOHS, Ministry of Development, Ministry of Social Welfare, Gender and Children’s Affairs, Ministry of Information and Broadcasting, donors, NGOs, Paramount Chiefs, Children Forum Network, and the Inter-Religious Council.

b) Resources Used

	RR	OR	RR for OR	7% RR Global Set Aside	Thematic funds	Total
Approved budget in the CPD for 2007	\$ 451,000	\$ 640,000				
Available Budget in 2007	\$ 674,972	\$ 330,229	\$ 305,700	\$ 475,000	\$ 1,974	\$ 1,787,875

The main donors for the Adolescent HIV and AIDS prevention programme in 2007 are the UK National Committee and DFID. .

c) Results Achieved

A key result achieved over 2007 has been the integration of children and HIV issues into the national political and development agendas. HIV in children is now part of both the Reproductive Health Policy and the Child Health Policy endorsed by the Cabinet in 2007; it is also incorporated into the Reproductive and Child Health Strategic Plan. The Education Sector Plan recognizes that the absence of a sufficiently well planned education programme could lead to a rapid rise in the HIV prevalence rate.

The National Conference on children and HIV/AIDS, held in November 2007 – the first of its kind in Sierra Leone - was a demonstration of the high level political commitment as it was spearheaded by the Vice President. The recommendations and the action plan that followed from the Conference will lead to an increase in the resources leveraged for children and HIV issues.

The partnership created between the Baylor International Paediatric AIDS Initiative (BIPAI), the Ministry of Health and Sanitation, the National AIDS Secretariat and UNICEF is also a key achievement of 2007, because of the implications it has on building national capacity for AIDS pediatric care and the exposure of Sierra Leone to successful experiences for dealing with HIV/AIDS in countries with high prevalence rates.

Specific results achieved

In terms of prevention of HIV/AIDS among adolescents and young people, UNICEF supported in 2007 the assessment of the life skills based HIV education interventions. Key challenges were identified and recommendations were made to strengthen this programme, given its importance in HIV/AIDS prevention. Teaching life skills in classroom as part of the government curriculum was initiated this year in grades 4 and 5 of primary school. Using the new National Teaching Syllabus for Life Skills, training was organized for 2,000 teachers from 995 primary schools countrywide (about 23% of the country primary schools). The training of an additional 1,712 teachers is ongoing at the time of writing this report. The trained teachers will be delivering these life skills over the next months to about 400,000 primary school children throughout Sierra Leone.

In terms of awareness raising activities among children and young adolescents, students from nine colleges and universities and 17 vocational institutions received key messages on HIV prevention during various athletic sessions. Through UNICEF supported NGOs, extra-curricular HIV prevention activities were organized in 30 schools and their surrounding communities; a total of 10,000 adolescents and out of school children were reached in Koniadugu, Pujehun and Kailahun districts. Assorted appropriate supportive documents were produced to facilitate the awareness raising sessions and the extra-curricular activities.

It has not been possible to make any progress on reaching the out of school children, due largely to constraints caused by the elections. This remains however a priority that needs to be addressed in 2008, as one in three children in primary school age are in fact out of school. There is a need for developing an information package for both children and parents, as well as a harmonized teaching tool. These will be prioritized in 2008.

UNICEF's contribution to strengthening PMTCT continued also throughout 2007. Given the increase in HIV prevalence in antenatal clinics from 2.9% in 2003 to 4.1% in 2006, advocacy and technical support were provided to ensure that the Reproductive Health and the Child Health Policy documents finalized in 2007 and the Reproductive and Child Health Strategic Plan incorporate PMTCT, paediatric care and the care of orphans and vulnerable children, including HIV/AIDS orphans and HIV/AIDS affected children.

PMTCT has been fully integrated into the routine antenatal care. Elements of PMTCT and AIDS pediatric care were incorporated into the Under five Card and the EPI monitoring tools. Technical support was provided to expand PMTCT services to 72 new PHUs spread over the 13 districts, hence bringing the total number of health facilities with PMTCT services to 162, up from 90 in 2006. The ARV prophylaxis regimen for both mothers and infants was updated, shifting from the single Nevirapine dose to a more complex regimen (AZT, Nevirapine and Lamivudine). The capacity of 57 District Health Management Team members and 344 front line health workers was strengthened in monitoring and evaluation and in the new regimen. Test kits and supplies required for care of 50,000 pregnant women and their children were procured to support the expansion of the PMTCT and pediatric care programme.

Results indicate that although still low, access to voluntary counseling and testing (VCT) for PMTCT by pregnant women has significantly increased nationwide to 15% in 2007, compared to 4% and 8% in 2005 and 2006 respectively. Uptake of NVP prophylaxis by identified HIV positive pregnant women remained steady as in 2006 (72%). However, NVP uptake in infants remains low (25%). Remaining challenges include male participation in the VCT programme (and its potential implications on uptake of services by mothers and children) and the implementation of the new ARV regimen.

In terms of pediatric AIDS treatment, care and support, a Memorandum of Understanding was signed between UNICEF, the MOHS, NAS and Baylor International Pediatric AIDS Initiative (BIPAI) for the establishment of Pediatric HIV care. National guidelines were finalized and a draft strategic framework was developed. Sixty (60) professionals from private and public hospitals were trained countrywide on pediatric HIV treatment and 130 front line health workers from PHUs in the northern, eastern and southern regions were trained on signs for early detection of HIV in children. This represents significant progress in terms of increasing national capacity for pediatric AIDS care and treatment; in 2006, there was only one Freetown-based-pediatrician with knowledge and skills to manage pediatric HIV. Although still very low, the number of children receiving ARV treatment has increased from 8 in 2006 to 27 in 2007. However, much still needs to be done as the proportion of children receiving ARV treatment among PLWHA is < 1%, compared to the recommended 15%.

In terms of addressing orphans and vulnerable children issues, identification and registration of HIV affected children system was initiated in collaboration with the association of Persons Living with HIV and AIDS (PLWHA) using the health care delivery system. Results from two regions (Western and Eastern) showed that among the 941 HIV affected children identified, 741 are orphans (of whom 195 double orphans). This initiative is the first of its kind in terms of the national HIV response, as no information was ever available on HIV affected children in the country. The process will be continued in 2008 to reach the remaining regions. Results obtained so far will be useful for guiding the development of the national programme on orphans and vulnerable children.

As indicated earlier, the HIV/AIDS programme had significant achievements in 2007, not least of which is the organization of the first children's lead national conference on HIV and children. Four hundred (400) children from 149 chiefdoms in Sierra Leone participated in the regional consultations held prior to the

conference and in the conference itself. The conference was a clear show of the strong political will and commitment of Government to address HIV/AIDS issue. This was demonstrated by the participation of the Vice President and five key ministers (Finance and Development, Health and Sanitation, Education and Youths, Social Welfare and Children's Affairs and Information and Broadcasting).

HIV/AIDS continued to be strongly mainstreamed in the media through various Radio and TV programmes and newspapers articles, including some lead by children themselves. One hundred journalists from electronic and print media were trained on various aspects of HIV/AIDS, including reporting strategies. Results have shown a clear improvement in the number and way in which children and HIV are dealt with in the local media. Through partnership with Manchester United and the UNICEF UK NatCom, a national campaign on children and HIV is under preparation. Billboards, radio and TV spots have been produced and the nationwide campaign will be launched in January 2008 in the 12 districts and in Freetown.

Critical factors and constraints affecting performance

- **Health system related constraints:** a number of factors have led to low access and uptake of PMTCT and pediatric care services. These factors include limited number of qualified human resources especially at district level, weak integration of health services, high proportion of deliveries taking place at home (70%) and weak monitoring and supervision at all levels.
- **Attitudes and practices:** HIV/AIDS is still a stigma in Sierra Leone. The attitude of male partners towards VCT and the high drop out after identification of HIV positive pregnant women is a big challenge that needs to be overcome. Decision making and unequal power within families may be a significant determinant of health seeking behavior in general in Sierra Leone; when it comes to HIV/AIDS issues, such inequality may further exacerbate decisions and outcomes.

Monitoring, study and evaluation methods

An assessment of the life skills programme was conducted in 2007 with the support of UNICEF. The purpose of the assessment was to identify actions made on Life Skills education in primary schools, identify the organizations involved and formulate necessary recommendations. The results of the assessment were quite positive in that they showed that life skills are politically accepted and followed in schools. Gaps identified include absence of a unified curriculum across all districts, limited involvement of the MEYS in many instances and limited number of trained and qualified teachers.

Appropriate recommendations were made to the Ministry of Education, Youth and Sports including the need to:

- i) define Life Skills education more clearly and promote it more widely;
- ii) bring the district education offices into the implementation mainstream as quickly as possible;
- iii) support districts to acquire the capacity to plan and implement Life Skills activities;
- iv) develop and implement a strategy for unifying the manuals used in schools
- v) develop and implement a strategy for training more Life Skills teachers; and
- vi) develop supportive partnerships between schools and communities, to ensure the continuity required between school and community.

Key partnerships and interagency collaboration

UNICEF is working closely with the National AIDS Secretariat (NAS), as well as various technical counterparts at national, district and international levels. Key counterparts/partners working with UNICEF include also the key line ministries of Health and Sanitation, Education, Youth and Sports, Social Welfare, Gender and Children's Affairs, Information and Broadcasting. Close collaboration is also done with key NGOs active in the area of HIV/AIDS, as well as key donors especially DFID. The Children Forum Network (consisting of children) and the Ministry of Finance and Economic Development played a key role in advocacy in 2007 through the National Conference on Children and HIV/AIDS. UNICEF is an active member of the UN Technical Working Group on HIV and AIDS; the group is currently chaired by WHO.

d) Future Work plan

Priority actions planned for 2008

UNICEF contribution to the national HIV response in 2006 and 2007 aimed to establish a system allowing children to access HIV prevention, treatment and care services. In 2008, efforts will focus on leveraging resources for children by:

- i) ensuring that resources mobilized through GF Round Six are fully used for children - as planned in the funded proposal, notably PMTCT, pediatric care, OVC and primary prevention
- ii) supporting the development of GF Round 8 proposal and assessing the need/feasibility of UNICEF being a principal recipient.

Other key priority actions for 2008 include:

- i) strengthening PMTCT and the newly established pediatric HIV care with particular emphasis on its integration into emergency obstetric and neonatal care (EMOC) and into services provided for children under five years, at both PHU and hospital levels;
- ii) expanding life skills education to more primary schools through in service teachers training and through integrating life skills into the curriculum of teachers' training colleges;
- iii) assessment of opportunities and identification of strategies to reach out of school children with life skills activities, and;
- iv) strengthening systems for the identification and care for HIV affected children and other vulnerable children in collaboration with Child Protection programme.

Specific adjustments for 2008

From 2008 and onwards, there will be a major shift from HIV/AIDS being a stand alone to a more integrated and cross cutting programme. The HIV/AIDS Prevention Project will be nestled in the Child Survival and Development programme. The HIV/AIDS project will collaborate with the Child Survival and Development programme at large to include PMTCT, VCCT, pediatric HIV treatment, care for victims of sexual violence and HIV affected children at all levels of the health delivery services and to expand and strengthen the partnership built with BIPAI for national capacity building in pediatric HIV/AIDS. The HIV/AIDS project will work with the Education programme to ensure that life skills education is integrated into the curriculum of teachers' training colleges and into all in-service training provided for primary school teachers. The project will collaborate with the Child Protection programme to develop a database on orphans and vulnerable children, including HIV/AIDS affected children.

The HIV/AIDS project will have to ensure in 2008 horizontal coordination across the three programmes (Child Survival, Education and Child Protection) on HIV/AIDS issues to guarantee consistency, coherence and complementarity.

Resources available and funding gaps

The funding for HIV/AIDS in 2008 will come from funds under the Child Survival and the Education Programmes. The country office is currently in the process of allocating funds to the specific components under each one of these two Programmes. It is estimated that a funding gap of \$1.5 million exists for 2008. .

COUNTRY PROGRAMME COMPONENT: CHILD PROTECTION

Main 2006 -2009 MTSP focus area addressed: FA4

Main MTSP Key Results Area addressed: FA4-KRA1, 2 and 5

a) Purpose of the Programme Component

The aim of the Child Protection programme is to contribute to the building of a protective environment for children against violence, exploitation, abuse and deprivation of primary caregivers. The programme is in line with pillars I and III of the PRSP – promotion of good governance, security and peace building; promotion of human development; the programme is also in line with outcomes 4 and 5 of the 2006-2007 UNDAF –

intensified response for HIV/AIDS prevention, care and support, and strengthened capacity of key national and local institutions for reconciliation, security, improved governance and respect for human rights respectively; the programme serves to support Sierra Leone in its efforts to reach MDG 6 on HIV/AIDS. The Millennium Declaration which focuses on the prevention of violence, exploitation, and abuse towards children is directly related to this component as well as MDG 3 “promote gender equality and empower women”. The results set for the programme in 2007 include: i) evidence based advocacy is carried out and partnerships are widened around child marriage and FGC; ii) policies, norms and standards are developed for OVC and for the protection of children in schools against sexual exploitation and abuse; iii) capacity of MSWGCA and other stakeholders is strengthened to monitor and coordinate the child protection situation in Sierra Leone, including the care and protection of children in residential institutions and the prevention of trafficking and illegal adoption. The Child Protection programme has one consolidated AWP with three projects.

The main partners include the Ministry of Social Welfare, Gender and Children’s Affairs (MSWGCA), MEYS, MOHS, Ministry of Development, Ministry of Local Government, Decentralization Secretariat, Local Councils, Donors, NGOs, Paramount Chiefs, Children Forum Network, and the Inter-Religious Council.

b) Resources used

	RR	OR	Thematic funds	Total amount
Approved budget in the CPD for 2006	\$ 437,000	\$ 897,500		\$ 1,334,500
Available Budget in 2007	\$ 580,850	\$ 980,040	\$ 4,456	\$ 1,565,346

The main donors to child protection in 2007 were the French National Committee for UNICEF, DFID, US Fund for UNICEF and the US State Department for a project on child trafficking. The contributions from each are listed in the following table.

Donor	Amount in US dollars
French Committee for UNICEF	583,537
US Fund for UNICEF on OVC	35,413
US State Department for trafficking in Persons	83,460
DFID for project on OVC	277,630
TOTAL	980,040

c) Results achieved

Perhaps the best achievement of the Child Protection programme in 2007 is the successful shift made from an emergency and service delivery based approach to a long term development approach that aims at building child protection systems and structures that serve all children. Counterparts and partners took stock of the shift in UNICEF’s approach to child protection in Sierra Leone, and have been clearly motivated and inspired by it in their own approaches and activities. Strong foundations were laid for a sustainable child protection and care system for orphans and vulnerable children, ensuring the realization of their rights to health and education .

Another key achievement is that of helping to break the silence on culturally sensitive and taboo issues— notably child marriage and female genital cutting (FGC). These have been taken up by UNICEF in discussions with Government and partners, focusing at this initial stage on getting a better understanding of the dynamics around these issues.

Specific results achieved

In the area of child marriage and female genital cutting (FGC), UNICEF successfully established a partnership around FGC with the National Movement for Emancipation and Progress (NAMEP), a coalition of mainly national and some international NGOs active on the issue of FGC. A team of an international and a national consultant have been engaged to undertake a qualitative study on FGC, especially on its social dynamics in Sierra Leone; the study is under progress at the time of writing this report and the results are expected at end February 2008. Although this is thought to be a preliminary study, it is expected that it will shed important light on the main features of FGC and serve as grounds for better programming in this area.

UNICEF also established a sound partnership with the Inter Religious Council Sierra Leone (IRC-SL) on child marriage. Advocacy, sensitisation and publicity were successfully carried out in communities, including religious and traditional leaders. Communities have been identified willing to work on by-laws on ending child marriage. This will be continued and expanded further in 2008 and beyond.

In the area of orphans and vulnerable children (OVC), UNICEF engaged Local Councils on the rights and needs of these children. In total 49 Local Council members, 66 Paramount Chiefs (or their representatives) and 36 personnel from the Ministries of Education, Youth and Sports (MEYS), Health and Sanitation (MOHS), and Social Welfare, Gender and Children's Affairs (MSWGCA) were sensitized on OVC. Local committees around orphans and vulnerable children were established in the six focal districts targeted by UNICEF in its 2004-2007 programme. These will transform into the District Child Protection Committees under the Child Rights Act. The Local Councils are undertaking activities to start identifying OVC in their communities and to include attention/action for OVC in the District development plans. The OVC Task Force, chaired by the MSWGCA, was revived and the number of members as well as their participation in the Task Force meetings increased during the year; the level of discussions within the Task Force moved from focus on individual children cases to more strategic deliberations around policies and strategies for addressing a larger number of children. Advocacy was successfully carried out to include OVC in the Education Sector Plan and the Child and Reproductive Health Policy and their respective implementation plans. In two districts, 204 teachers and School Management Committee members were trained on the protection and rights of OVC in schools. Steps were initiated in five communities to identify OVC and their needs, build a database and support schools and PHUs in including OVC in their services.

A mapping of all residential institutions for children was carried out, including the development of a database with key information on children in these homes. Results indicate that about 25% of the children in those institutions still have one or both parents alive. A reintegration plan of these children into their families will be developed, including assessment of the support required for these families to take care of their children. With the involvement of the MSWGCA and representatives of the residential institutions, draft minimum standards for care and protection of children in these facilities were developed. A regulatory framework and a monitoring system still need to be developed in 2008. Together with the minimum standards, these will guide the MSWGCA in their role as regulatory and monitoring agency on the issue of children deprived of primary caregivers, especially those in foster or residential care.

In terms of responding to gender based violence (GBV), a referral protocol for service providers of child victims of violence was developed and is currently being implemented in three districts. Implementing partners and the MSWGCA provided counselling, legal advocacy and referrals for support services to the victims. A first draft of a Code of Conduct for teachers has been developed by MEYS and the Sierra Leone Teachers' Union. Additional efforts however need to be exerted to ensure that this Code is internalized by teachers and that enforcement procedures are put in place and followed.

In the area of child trafficking, with the International Organization on Migration (IOM) as the key partner, an outline of a three-year Anti-Human trafficking plan is being developed and 217 personnel from service providers – GoSL and NGOs - were trained on trafficking prevention, response and monitoring. Training was also organized for 215 staff from the police, immigration, border patrol and the Judiciary on the legal implications of trafficking. In the districts falling on border areas with neighboring countries (notably Guinea

and Liberia), 223 community leaders were sensitised on trafficking and the support to victims. The referral mechanism developed for victims of child abuse, will also be used for child trafficking victims. This is all part of the effort of building one child protection system that can benefit all children in need of protection, rather than setting up parallel structures.

Critical factors and constraints affecting performance

Main constraints faced in programme implementation include:

- ***Low capacity of counterparts and partners in the area of child protection:*** this involves both the capacity of the personnel working at the Ministry of Social welfare, as well as NGOs staff. Also, in terms of budget, the Ministry of Social Welfare, Gender and Children's Affairs which is the main counterpart in the area of child protection has only 0.5 % of the national budget, and therefore is not able to cover even some routine running expenses.
- ***High turn over rate amongst the child protection team in the UNICEF office:*** the Child Protection within UNICEF has undergone many changes in the staff over the past one year. While this has been refreshing in terms of new insights into doing child protection work, it has at the same time slowed down the work. The continuous orientation of the new staff members coming on board was time consuming.
- ***Elections process:*** the elections slowed down the work considerably as there was a ban on travel up country and the counterparts were busy with the elections during two months approximately.

Some lessons learned:

- One-off trainings are not effective, nor are single interventions on behalf of children in a community. If UNICEF wants to capacitate communities to take care of their children, especially the most vulnerable ones, an integrated approach with health and education – such as that initiated in 2007 - is called for and the interventions need to be long term and with regular follow up.
- Importance of working with the Local councils and the Decentralisation Secretariat. This will be even more important in 2008 given the role of Local Councils in child protection as per the Child Rights Act.

Monitoring, studies and evaluation methods

A mapping of residential institutions for children was conducted in 2007, including a database on children in these institutions. The study together with the outcomes of the workshop on minimum standards of care and protection, will inform the development of an alternative care system for children deprived of parental care.

A qualitative study on knowledge, attitudes, behavior and practices with regard to female genital cutting has been initiated in December 2007. The results are expected by end February 2008, and would help in designing an appropriate programmatic course of action. Another study was planned on child marriage and its relation to girls' education. However, it was not possible to identify a suitable consultant to direct and supervise this study.

The results of the MICS-3 study have been used in advocacy in the areas of OVC, child marriage and FGC. Currently a study on FGC is being undertaken and will bring for the first time important information about this phenomenon in Sierra Leone. It is expected that results will guide advocacy and programme design.

Key partnerships and interagency collaboration

The main counterpart for the Child Protection programme is the Ministry of Social Welfare, Gender and Children's Affairs (MSWGCA). An important new partnership was built this year with the Decentralisation Secretariat (within the context of action on OVC), which linked UNICEF to the Local Councils; the partnership has been very successful and is expected to be further strengthened in 2008. Other important collaboration was maintained and further developed with the Family Support Unit of the Sierra Leone Police, MEYS, MOHS and Ministry of Justice (MOJ). Partnerships with donors and NGOs like CCF, DCI, CCSL, IRC-SL, Save the Children, IRC were strengthened. IOM was an important UN partner in the area of child trafficking.

d) Future Work Plan

Priority actions planned for 2008

Efforts have started in 2007 to look into building the capacity of the MSWGCA as far as it relates to child protection. It is planned that those efforts will be continued and even strengthened in 2008, while giving special consideration to engaging other key actors and development partners and to identifying more creative ways to build the Ministry's capacity, given the largely unsuccessful experience in this regard in the past.

The Child Rights Act has a strong child protection component. Implementation of the Act will be an important area of work in 2008, especially where it coincides with the development of a child protection system. The latter will need a strong, long term strategic plan, to be developed by the MSWGCA in collaboration with development partners. The development of a licensing and monitoring system of alternative care will be an important component of the child protection strategy. Capacity building of the MSWGCA is essential for success in this area.

The two-year DFID-funded OVC project is half way through. The emphasis in 2008 will be on building community capacity to take care of the most vulnerable children, using an integrated and long term approach. Sustainability of the interventions will be an important indicator for success and may extend beyond 2008. As the OVC project is the backbone for the new Child Protection programme, extension of the activities in relation to OVC will be planned for in 2008.

Many efforts went in 2007 into building the capacity of service providers and government on response to child victims of violence, including child trafficking. The gains made may soon disappear if no follow up is done. Further training of service providers will be supported, including training of social workers from the MSWGCA.

Specific adjustments planned for 2008

The new country programme 2008-2010 has integrated some child protection interventions under the Child Survival and Development and the Education programmes. The Chief Child Protection will have to reach out to those two programmes and organize horizontal coordination around the technical area of child protection across the three programmes to ensure coherence, complementarity and consistency of interventions.

Resources available and funding gaps

The funds available for the Child Protection programme for 2008 and beyond (up till 2010) are US Dollars 732,000 per year from RR sources. The OR funds planned for the Child Protection programme are equivalent to US Dollars 1,400,000 per year over the period 2008-2010. Of those planned OR funds, only the amount of 872,660 US Dollars is available for the first year of programme implementation, i.e. 2008. The OR Funding gap for the Child Protection Programme is therefore 527,340 US Dollars for 2008, while no OR funds are available for 2009 and 2010. Fund raising efforts will concentrate around a comprehensive proposal on child protection, from which donors could select specific interventions they are interested to fund.

2.2.5. COUNTRY PROGRAMME COMPONENT: Water and Sanitation

Main 2006-2009 MTSP Focus Area Addressed: FA1 – FA2

Main MTSP Key Results Areas Addressed: FA1- KR3, FA2 –KR2, FA2-KR3

a) Purpose of the Programme Component

The aim of the Water and Sanitation Programme is to contribute to improving the health status of children in Sierra Leone. The programme is in line with pillar III of the PRSP – promotion of human development; the programme is also in line with outcomes 3 of the 2006-2007 UNDAF – improved health for all citizens especially women of child bearing age and children under five years of age; the programme serves to support Sierra Leone in its efforts to reach MDGs 4 and 7 on child health and on environmental sustainability respectively.

The expected outputs for the Water, Sanitation and Hygiene programme for 2007 included: increased access to safe water and sanitation in 940 schools and PHUs in the districts of Bombali, Kono and Koinadugu; improved hygiene and sanitation knowledge and practices in 300 schools and catchments communities, and; national and local capacity of key partners in developing a national water policy, and in planning, monitoring and evaluation of water and sanitation activities.

There is one consolidated AWP under this component with three projects. The main implementing partners include the Water Supply Division of the Ministry of Energy and Power, NGOs such as CADO, LWF, CAUSE Canada, AFRICARE, as well as Local Councils, local contractors and communities. Work is also done in close collaboration with MOHS and MEST.

b) Resources Used

	RR	OR	RR for OR	Thematic funds	Total amount
Approved budget in the AWP for 2007	\$ 437,000	\$ 897,500			\$ 1,334,500
Available budget in 2007	\$ 738,269	\$ 419,560	\$ 432,712	\$ 180,000	\$ 1,770,541

The main donors to water and sanitation were the Government of Norway and the Government of Japan and their contributions are listed in the following table.

Donor	Amount in US dollars
Japanese SC/05/125	413,893
Norway SI/06/147	5,667
Grand Total	419,560

c) Results Achieved

The principal achievement for the WASH section for 2007 was its contribution to strengthening the WASH sector in Sierra Leone and to defining a new approach to water, sanitation and hygiene interventions that will shift interventions from mainly hardware water supply driven interventions to interventions that also focus on sanitation and effecting change in individual and community behavior. This has been possible largely through the partnership that was initiated with DFID in preparation for a comprehensive support to the WASH sector in Sierra Leone.

Strong advocacy and high level dialogue was made to ensure that the two sectoral plans on Education and on Reproductive and Child Health include the component on water, sanitation and hygiene. The fact that UNICEF is a coordinator of Development Partners for these two sectors has positively contributed to these advocacy efforts and the ensuing results.

Another achievement was the initiation of work on a WASH database. This will enable Sierra Leone to have the required data for more effective programme design and for tracking progress on the MDGs related to water and sanitation, but also those related to child health and education.

Specific results achieved

The year 2007 has witnessed the completion of the activities under the government of Japan funded project. The project has succeeded in construction of 252 new wells, 324 latrines for 224 schools, 430 family latrines and rehabilitation of 338 water wells for the catchment communities of the schools and the peripheral health units. These have lead to a decrease in the incidence of malaria from 40.5% to 35% in Bombali, from 36.7%

to 34% in Kono and from 29.2% to 26% in Koinadugu. In the area of water and sanitation, the programme has made significant gains by increasing access to safe drinking water supply to about 600,000 people and 100,000 school going children in the three districts targeted by the project.

Rainwater harvesting schemes were initiated in three schools in the district of Bombali; more efforts need to be done in this direction in 2008, given the heavy rainfall in Sierra Leone and the possibility of using this as an a significant source of water.

Efforts have been also exerted to develop a standard design for water and sanitation facilities to be adopted by the Ministry of Education, Youth and Sports for both formal and community schools. Only partial success can be claimed for establishing this design, although one latrine design that was developed has been adopted for use elsewhere in the country. More advocacy efforts need to be carried out to ensure that this is formally adopted by the Ministry and communicated to all partners involved in this sector.

In addition to UNICEF's support to the regular disinfection program of water wells through distribution of chlorine, the WASH programme provided additional supplies of chlorine powder in response to reports of presumed cholera cases in Kambia, Port Loko and part of Freetown. The chlorine was used to disinfect wells and other water sources.

Drafting of a National Water and Sanitation Policy has continued throughout the year. UNICEF made significant contributions to the drafts produced. The Policy is yet to be finalized. Efforts were also made and resulted in successfully integrating water, sanitation and hygiene issues into the Child Health Policy, the Education Sector Plan and the National Strategic Plan on Reproductive and Child Health. The position of UNICEF as coordinator of the Development Partners Groups in Health and Education has contributed to the success achieved in this regard.

Factors and constraints affecting performance

The implementation of the 2007 AWP in water and sanitation was affected by the unusually long rainy season experienced by Sierra Leone this year, which made transport of materials and construction of facilities difficult. In addition, the national presidential and parliamentary elections held during 2007 and the accompanying political activities and campaigning limited field visits to project sites.

The national water and sanitation sector in Sierra Leone remains weak. The Water Supply Division within the Ministry of Energy and Power has limited capacity, and very little is done in the sanitation field by MoHS. The devolution of responsibilities for water and sanitation to district level has also been complicated given the unclear responsibilities and the limited technical capacities, especially at district level.

Partnerships and interagency collaboration

The Water and Sanitation programme has a number of counterparts, including the Ministry of Energy and Power, MOHS, and MEYS and donors. At the local level, UNICEF WASH programme collaborates with the Local District Councils. Improved relations have been noted in 2007 with the NGOs, and UNICEF now attends the monthly meetings of the INGOs forum on water and sanitation. A partnership is in the making with OXFAM GB.

UNICEF participates also in the monthly Water and Sanitation coordination group meeting, called for by the MOEP. UNICEF is not the sector coordinator for Water and Sanitation; a conscious decision has been made regarding this issue, given the limited staff capacities at UNICEF and the great needs that exist in the country. It is expected that in 2008, DFID will play the role of sector coordinator for the WASH sector.

In terms of inter-agency collaboration with UN sister agencies, UNICEF has worked closely during 2007 with UNDP and UNESCO to establish the National WASH database. UNICEF has also collaborated with WFP in sharing information about water points in schools.

d) Future Work Plan

Priority actions planned for 2008

Following the shift in the Water, Sanitation and Hygiene programme from being a water supply hardware driven approach to an integrated approach that puts hygiene and sanitation first, an important component of the programme in 2008 will be the introduction of principles for CLTS and SLTS (Community Led Total Sanitation and School Led Total Sanitation). Workshops are planned for early 2008 to promote CLTS and SLTS principles and adapt them to suit the situation in Sierra Leone. An emphasis on sanitation during 2008 is particularly relevant as it will be the International Year of Sanitation.

Other activities during 2008 will include construction of water and sanitation facilities at schools and PHUs, and in communities; and documentation of lessons learned from the 'Adopt a family' scheme before going to scale with the scheme.

The WASH database has been developed, but additional work will be needed during 2008 to collect and update data, promote the database and establish its sustainability. For this purpose, a special agreement will be enacted with Government to ensure that they take over responsibility of the database after five years.

It is expected that the partnership with DFID and for which preparations have started in 2007 will materialize in 2008. The purpose of this partnership with Government of Sierra Leone and DFID is to strengthen the water and sanitation sector in Sierra Leone and to enable *whole* rural and urban communities, especially the poorest women and children, to adopt safe hygiene and sanitation practices and consume safe water. DFID proposes to allocate £8.5m (over a period of five years) to UNICEF Sierra Leone, to undertake activities in rural water supply and sanitation.

Adjustments planned for 2008

The new country programme 2008-2010 brings in significant changes to the Water, Sanitation and Hygiene programme in that it will be integrated into two programmes, notably the Child Survival and Development programme and the Education programme. The Chief of Water, Sanitation and Hygiene will be nestled in the Child Survival and Development programme, while there will be another international professional in WASH in the Education programme. The Chief will have to organize horizontal coordination around the technical area of water, sanitation and hygiene across the two programmes to ensure coherence, complementarity and consistency of interventions.

Should the DFID funding for the Water, Sanitation and Hygiene programme in Sierra Leone come through, this will require a substantial increase in staff who will be hired most likely on TFT basis.

Resources available and funding gaps

The funding for Water, Sanitation and Hygiene in 2008 will come from funds under the Child Survival and the Education Programmes. The country office is currently in the process of allocating funds to the specific components under each one of these two Programmes. Therefore, it is not possible to report at this point in time on funding gaps. However, it is worth referring again here to what has been mentioned above in terms of possible allocation of £8.5 million from DFID.

2.2.6. COUNTRY PROGRAMME COMPONENT: Planning, Monitoring and Evaluation

Main 2006-2009 MTSP Focus Area Addressed: FA5

Main MTSP Key Results Areas Addressed: FA5 - KRA1; FA5 – KR2; FA5 – KR3; FA5 - KR4

a) Purpose of the Programme Component

The aim of the Planning, Monitoring and Evaluation programme is to provide technical support in programme planning, monitoring and evaluation to all sections. The objective is to provide technically sound methodologies to all programmes and counterparts in identifying significant knowledge on the situation of

children, the fulfillment of their rights and the MDGs. Emphasis is placed on collecting and disseminating information that is accurate and valid to indicate impact of programme interventions on the target groups. The programme contributes to all the pillars of the PRSP – as it essentially focuses on data required for monitoring progress on each of the three pillars. The programme contributes also to the IMEP of the 2006-2007 UNDAF. The results set for the programme in 2007 included: incorporation of the needs of children in the planning and monitoring and evaluation processes of UNICEF Country programmes; effective monitoring and evaluation of the extent to which the Government of Sierra Leone and UNICEF programme contribute to attainment of the rights of children, and; improving the knowledge base and strategic information on children, which eventually will result in appropriate and effective responses to the needs of children.

The Planning, Monitoring and Evaluation programme has one consolidated AWP. The Programme works with programme staff, partners and counterparts to plan evidenced based and quality programmes to address the situation of children’s rights. Important data and information is collected to monitor progress towards the achievement of the MDGs, the PRS and the UNDAF priorities.

The main collaborating counterpart is the Ministry of Finance and Economic Development. This ministry is also the coordinating partner of the entire UNICEF country programme, including line ministries of Health, Education, Social Welfare, Gender and Children’s Affairs and Statistics Sierra Leone. The Programme also works with NGOs, DONORS, communities, traditional and political leaders including Paramount Chiefs, and parliamentarians. There is only one AWP under this programme component.

b) Resources Used

	RR	OR	Total amount
Approved budget in the CPD for 2007	226,600	50,000	276,600
Available Budget in 2007	384,634	113,118	497,752

Set Aside GC funds and thematic funds in the area of child protection were used to address birth registration activities in the programme. A need for the production of increased number of MICS report and the conduction of a Global study of Child Poverty benefited from funds allocations from NYHQ.

c) Results Achieved

A major achievement over 2007 has been the finalization of the MICS 3 survey report. The results of MICS 3 were utilized extensively in the preparation of the 2008- 2010 UNDAF and the UNICEF 2008-2010 country programme for Sierra Leone. The Child Protection programme made also use of the results of the MICS 3 in programming for orphans and vulnerable children; results were also used for advocacy around FGC and child marriage. The election process led to a delay in the official launching of the MICS 3 report, which took place only in December.

The adoption of the Child Rights Act in June 2007 has also involved the Planning, Monitoring and Evaluation programme in substantive work, especially in terms of providing the necessary technical assistance to the MSWGCA and to Local Councils for planning the roll-out of the Act. A team comprising an international and a national consultant were hired to work with the Planning, Monitoring and Evaluation team and the MSWGCA on the roll out plan. A national workshop was held with stakeholders to develop a national Strategic Plan of Action. The plan is currently being finalized with the Ministry of Social Welfare, Gender and Children’s Affairs. Also, a child friendly version of the Child Rights Act has also been drafted with the assistance of international and national consultants. The document has been field tested with children and teachers and is currently being finalized.

In terms of birth registration, support was provided by the Planning, Monitoring and Evaluation programme for accelerated birth registration through campaigns and for long term capacity building in this area. Hence, UNICEF supported the four districts of Kambia, Tonkolili, Bo and Bonthe in carrying out campaigns to increase awareness about birth registration; training was organized for 267 birth registrars in PHUs and 267 notifiers on the importance of birth registration and on the way to properly record the information on births. Results indicate that a total of 124,155 children aged 0-17 years have been registered in these campaigns. The District Health Management Teams of these four districts received supplies such as bicycles, motor bikes, furniture and equipment for their offices. Reports from routine registration for infants in the other districts reporting over 20,000 births registered. A consultant was hired to set up a database structure on birth registration in the six focus districts of UNICEF– Bombali, Koinadugu, Kono, Kenema, Kailahun and Kenema Districts; training was organized for the birth registrars and data clerks on managing the computerized database of birth registration.

The Planning, Monitoring and Evaluation programme has also made significant technical input into the preparations for the first Demographic and Health Survey that will take place in 2008-2009. The Programme initiated also a Study on Child Poverty and Disability funded by NYHQ, as part of the Global study comprising 40 countries

Critical factors and constraints affecting performance

- Limited capacities of counterparts and partners in addressing child rights issues, largely because of the under-utilization of the data available on children.
- Development of a national database through DevInfo implementation has been slow due to lukewarm support from the UN agencies.

Key partnerships and interagency collaboration

The main partners of the Planning, Monitoring and Evaluation programme include all key line ministries involved in the UNICEF country programme, as well as Statistics Sierra Leone and the Ministry of Finance and Economic Development as the coordinating ministry. Close collaboration will be made with the Local Councils for the roll out of the Child Rights Act and in the area of birth registration. Partners include also UN agencies, especially those involved in the DHS survey.

d) Future Work plan

Priority actions planned for 2008

In terms of support to studies, the Planning, Monitoring and Evaluation programme will focus in 2008 on: assisting within the context of the UNCT the government to conduct the first DHS survey; finalizing the Study on Child Poverty and Disability, and; finalizing a number of studies initiated by the various UNICEF programme sections in the areas of child protection, education and child survival. The programme will also support the Government to finalize the strategic plan for implementing the Child Rights Act.

Other priority areas include technical input into the PRSP and other national development plans that may be developed by Government. Support will also be provided to Government to develop a national strategic plan on birth registration, including UNICEF phasing out from the forms of support it has been providing to Government so far and gradually handing on responsibilities to government.

In terms of capacity building of the UNICEF staff and partners in planning, monitoring and evaluation, training will be organized for staff members, staff of other UN agencies and counterparts on DevInfo implementation.

Specific adjustments planned for 2008

An important area in which the programme needs adjustment is that of public policy and budget review. The new country programme for 2008 has included a change in the name of the Planning, Monitoring and Evaluation Programme to include in it Social Policy. More attention will have to be given to budget analysis of the key line ministries involved in children's issues to ensure that they respond to children's rights. Such

budget analysis will enable UNICEF in Sierra Leone to continue to be an advocate for leveraging funds and other resources for children. It is also a first step in making Government ministries take over many of the responsibilities which, so far, have been shouldered by UNICEF. This is in harmony with the shift that the UNICEF country programmes for Sierra Leone are taking from emergency and relief programmes to long term sustainable development programmes.

Resources available and funding gaps

The RR funds allocated to the Planning, Monitoring and Evaluation programme are US Dollars per year for 2008 and until 2001. No OR funds are available for 2008. To complement the RR funds, the programme will be required to write specific funding proposals to address focused evaluation and research needs of the country programme. The funding PR gap for 2008 is US dollars

2.2.7. COUNTRY PROGRAMME COMPONENT: EXTERNAL RELATIONS AND ADVOCACY

Main 2006-2009 MTSP Focus Area Addressed: FA5

Main MTSP Key Results Areas Addressed: FA5 - KRA1; FA5 – KR2; FA5 – KR3; FA5 - KR4

a) Purpose of the programme component

The External Relations and Advocacy Programme contributes to UNICEF's strategic goal on the well being of children in Sierra Leone primary. The programme is in line with the three pillars of the 2004-2007 PRSP for Sierra Leone. It also contributes to the 3 UNDAF outcomes for 2004-2007. The results planned by the Programme for 2007 included: mainstreaming of advocacy and awareness raising on child rights issues (especially survival and education) into UNICEF Programme interventions; strengthening child participation on issues pertaining to their well being (especially survival and education); building capacity of national media to support increased visibility on children's issues; widening partnership with private sector, bilaterals and multi laterals to leverage resources for children, and ; increasing and strengthening relations with donors and NATCOMS to ensure adequate funding for programme intervention. The Programme is consolidated into one AWP.

The key partners of the External Relations and Advocacy programme include the Ministry of Social Welfare, Gender and Children's Affairs, Ministry of Information and Broadcasting, key line ministries involved in the overall country programme, as well as the Local councils. Other key partners include the media, the Children Forum Network, the Parliament, communities, traditional leaders and other UN agencies primarily the United Nations Integrated Office for Sierra Leone. NATCOMS and other key donors to UNICEF are also important partners for the programme.

b) Resources used

The funds available for the External Relations and Advocacy programme for 2007 were from regular resources and amounted to 342,300 US Dollars.

c) Results Achieved

In terms of promotion of the Convention on the Rights of the Child, a significant milestone was achieved this year with the passage of the Child Rights Act by the Parliament of Sierra Leone on 7th June 2007. UNICEF in collaboration with the Justice Sector Development Project (JSDP) and other child protection agencies supported the Ministry of social Welfare Gender and Children's Affairs in facilitating public debates on the draft bill at several intervals in 2007 before the Act was passed. Advocacy radio jingles, TV spots, banners and placards with key messages from all categories of children which had been developed in 2006 were disseminated nationwide.

In terms of policy advocacy, UNICEF has contributed – as indicated under the various programme components above – to the development and finalization of the Child and Reproductive Health Strategic Plan, the Education Sector Plan, the Child Health Policy and the Reproductive Health Policy. UNICEF also served

as lead agency within the United Nations Communication Group in addressing pillar one of the UNCG strategic plan on influencing policy development and implementation on human rights with special emphasis on women and children. UNICEF also led the development of a concept paper and roll out plan for the communication component of the United Nations Development Assistance Framework 2008 -2010.

A number of special events were also supported in 2007. The State of the World Children Report 2007 on the theme “The Double Dividend of Gender Equality” was launched this year by the then Hon. Speaker of Parliament, Justice Edmund Cowan on 15th March 2007. Among the key issues highlighted were the role of women within the household, in employment as well as in politics and government. Emphasis was laid on the inadequacies of the laws, policies and practices in Sierra Leone in terms empowering women, and creating equal opportunities for development.

During the International Children’s Day of Broadcasting, 300 child presenters and 50 child producers–country wide - were trained in developing and presenting radio and TV programmes on the theme “the World we want” covering issues in HIV/AIDS, free and compulsory equal educational opportunities, accessible and affordable quality health care amongst others. For the first time this also included community radio stations in very district across the country.

Child participation was ensured in the preparation of the strategic plan for the implementation of the Child Rights Act, developing a child friendly version of the Act, and on several occasions in representing Sierra Leone in international forums. Also, the Voice of Children Project was well anchored within the UN radio plan. This year 50 children of the project were trained in presentation and production skills respectively. UNICEF has also provided office and studio equipment as part of its support to capacity building of the project. Of greatest significance has been effective negotiations and corporate agreement between the University of Sierra Leone Mass Communication Department at Fourah Bay College and UNICEF for the transition of Voice of Children into a national entity. A consultant is already on board to facilitate the process. A comprehensive transition plan and memorandum of understanding are currently being developed and it is anticipated that the process will be finalised in early 2008.

UNICEF through the External Relations and Advocacy Unit supported the MSWGCA in decentralising the Children Forum Network at district level with the establishment of four new branches in Kono, Tonkoli, Koinadugu, Kailahun, as well as strengthening the existing regional branches through leadership and effective communication training as well as the election of a new team of executives. The remaining districts of Pujehun, Bonthe, Moyamba, Port Loko and Kambia will be established in 2008.

Two editions of the “Pikin” (*Child in the lingua franca*) Newsletter were also produced by the network by an editorial board comprising representatives from all four regions. An important achievement for children this year was the hosting of the first ever National Conference on Children an AIDS in November 2007, with almost 400 child participants from the 150 chiefdoms nationwide. The conference was planned and organised by the children themselves with support from the National AIDS Secretariat, UNICEF, UN AIDS, Plan Sierra Leone, Caritas and other child focused organisations.

UNICEF also supported the participation of 13 years old Aminata Palmer at the J8 meeting held in Wismar Germany in June 2007. Aminata served as one of the spokes persons from non G8 countries and spoke on HIV/AIDS and Aid to Africa. Ms. Rosaline Conteh also joined her peers at a Children and AIDS meeting held in Belgium in November 2007 which was attended by Princess Matilde of Belgium. The Children in Belgium found it quite useful to have their own peer engaging them quite knowledgeably about HIV/AIDS.

Long term partnership (three years) was forged with the Belgian NATCOM for support to child Survival and similar discussions are under way with the Iceland NATCOM for support to Education. The Country office also enjoyed continued partnership with the Japanese government resulting in the provision of an additional US 2.3million for 2008 to address infectious diseases. This has brought the support of the Japanese Government to the Country office over the past four years to over US\$ 12million. The Blue Bag Project with

the SN Brussels crew also continued this year with the provision of educational materials and toys for children in underserved communities. The country office also enjoyed free miles from Brussels airlines.

Potential partnership was discussed with Radio Netherlands through INFORMOTRAC a local agent based in Sierra Leone and with BBC Trust for implementation of the programme communication component of the new country programme 2008 -2010. New partnership was also forged with the National electoral Commission for the promotion of Civic Education among non voters (all persons under 18) as well as facilitating the engagement of political leaders, (being an election year) on issues affecting children, especially free and compulsory primary education for very child especially girls as well as reduction in infant mortality.

With relative stability and gradual growth in the economy, plans are underway to engage the private sector in the new country program. An assessment of the existing private sector landscape will be conducted during the first quarter of 2008 which will serve as the basis to foster partnership.

d) Future workplan

Priority actions planned for 2008

Priority actions for 2008 include finalization of the UNICEF country kit which can be used for advocacy and information sharing purposes. Also, priority will be given to continued fund raising given the ambitious nature of the UNICEF 2008-2010 programme. Special emphasis will be put on developing long term partnerships that are very much built along the elements of the country programme, rather than upon specific projects as this will reduce and streamline the donor reporting obligations.

Resources available and funding gaps

The resources available for the Advocacy and Leveraging programme for 2008 are equivalent to 300,000 US Dollars per year for 2008 and beyond. The OR funds planned are 500,000 US Dollars per year also for 2008 and beyond. So far, none of these OR funds are available. Therefore, the funding gap is 1.5 million US Dollars for the period 2008-2010.

3. OPERATIONS AND PROGRAMME MANAGEMENT

a) Major initiatives taken by the CMT during 2007 to improve operations and programme management performance

The CMT held in 2007 monthly meetings and is functioning well. A set of management indicators both for Operations and Programme are closely monitored at the CMT meetings. The Programme Group briefs the CMT on the outcome of its monthly programme meetings. Special attention was given this year to reporting on the benchmarks set for funds utilization and programme implementation as follows: 40% by end April; 70% by end July; 90% by end October and 100% by end December. Other programme areas reported on at the CMT include donor reports, funding proposals, and cash assistance to Government. Operations presented reports to the CMT on the work and meetings of its various units; those section meetings were introduced in 2007 and found to be very useful in terms of follow up on CMT decisions. A number of Operations areas are regularly monitored by the CMT, including electricity, fuel and water consumption, mobile phone bills, drivers' time management, bank reconciliation, and PAR accounts.

The recommendations made by the Regional Operations Officer in 2006 and the Consultant in Supply and Logistics in the first part of 2007 were implemented and included:

- Removing Travel unit from HR unit and placing it under Administrative unit.
- Removing from the Supply section, the Logistics unit covering vehicle fleet and generators management and placing it under Administrative unit.
- Separating the Administrative and the Finance functions

- Setting up a new structure and reinforcing the Supply section through recruitment of a national officer at the NO-B level to be in charge of Procurement, while the officer in place became in charge of Supply management

Following a case of fraud in which four staff members were involved at the beginning of 2007, a number of additional control measures were put in place, including:

- Deployment of staff from other sections knowledgeable in Finance to undertake the Finance work
- Issuing at the end of every month a list of outstanding cheques (not collected by payees) in Finance section and its review at the CMT
- Recruitment of a retired international Finance staff on TFT to help building capacity in the finance work

In addition, the Office received special attention and support from Regional Office who sent in a very short time one Finance Assistant from Dakar regional office for 2 weeks, followed by one Finance Assistant for two months and then one Finance officer from Accra Office for two months also.

Following the decision taken at the end of 2006 for improving on a number of important programme management areas, the Office undertook in 2007 the following actions:

- PromS training: a five days training session was organized by a PromS resource person from the Middle East and North Africa Regional Office for UNICEF in June 2007; a total of 25 staff members participated in this intensive staff training and those became the resource persons on PromS in their sections
- The Table of Authorization (ToA) and the PromS planning outline were reviewed by an external Operations Officer on mission to Sierra Leone. The review was approved by the CMT and the new ToA was sent by the Representative to all staff members involved, along with a memo indicating the specific financial delegation for which they are responsible. The signed copies of these memos are kept at the Representative's office as per DFAM Advisory Note of 2005 (CF/DFAM/AN/2005-001).
- A number of functions which, so far, had been carried out by the office but posed great burden, were outsourced to contractors, notably the staff shuttle and the airport pick up services. Bids have also been sent at the end of 2007 to outsource the external travel and the conference organization services.
- Regular meetings of the programme assistants were initiated every quarter. The meetings were chaired by the Deputy Representative and the Planning Officer; they addressed a number of programme management areas; also a list of alternate programme assistants was agreed upon to ensure continued business in the sections when programme assistants go on leave.
- A schedule of capacity building sessions were organized for programme staff throughout the second half of 2007, and included topics such as results based management, DevInfo, programme indicators, and other topics of specific programmatic implications in the context of Sierra Leone.

b) Initiatives taken by the CMT in 2007 in human resource management

The staff retreat and a number of general staff meetings were used as opportunities to raise the issue of fraud and to introduce the organization's anti-fraud policy.

In preparation for the new country programme, an in-depth review of human resources capacity was conducted in August-September 2007 with assistance from a retired Human Resources Officer from UNICEF. The aims of this review were to identify human resources weaknesses and gaps and propose the required efforts to strengthen capacity of existing staff in order to meet future expectations, given the new country programme. Two orientation sessions were organized by the Human Resources Officer: the first was on the

principles of leadership development and was addressed to heads of sections and units and the second on change management and was addressed to all staff to help them deal with the changes brought forth by the 2008-2010 new country programme. Every staff member had the opportunity to meet individually with the consultant and to discuss career planning and individual learning plans. The exercise was said to be very rewarding by almost all staff.

Following the approval of the 2008-2010 country programme by the Executive Board and the proposed staff structure, an extensive recruitment process involving 23 GS positions and 13 national professional positions took place in November- December 2007. The appointment of GS staff was finalized by December 15, 2007, while the recommendations for the position of national officers were sent to the Regional Office for review and decision. Appointments for the new international professional positions for the new country programme will be done over the first two months of 2008.

c) Promotion of Staff Wellbeing

Efforts continued in 2007 to address staff well being and increase their awareness about HIV/AIDS. The Caring for us Committee organized open discussions, learning activities and awareness raising sessions, with participation of resource persons mostly from outside the office. A Voluntary Counseling and Testing (VCT) campaign was organized for all the staff at three intervals. Three staff members of the Caring for us Committee attended the Advanced Peer Support Training organized in Accra- Ghana in November 2007. JCC meetings were organized at any time the Staff Association requested.

d) The supply component of the country programme

Building on the recommendations of the Regional Operations Officer and the Supply Consultant made in December 2006, the Supply Section was revamped early 2007 and a revised structure set up under the responsibility of a new Supply Manager who came on board in April. An additional national officer was recruited at the NO-B level. A clear demarcation of responsibilities assigned was made between the two NO-B Officers – one in charge of Procurement and the other in charge of Supply and Logistics. Supply Management improved drastically in 2007 with a number of reforms made to streamline the processes and follow the established procedures and guidelines. The following are among the various steps taken during 2007 to provide solutions to issues raised in the area of supply and procurement in previous years:

- supply workflow process established;
- LTAs/Contracts put in place for items which were procured throughout the year, e.g. fuel, cement, etc.
- status report of all PGMs was introduced to track the supply chain, from the date a PGM was received, through the process of bidding, CRC, PO placement, delivery and payment, to closure and shared with programmes on a monthly basis;
- physical inventory carried out twice during the year;
- regular updating of inventory done and reports shared with programmes on a weekly basis. Programme staff were invited every month to visit warehouses to check on their inventory;
- regular monitoring of supplies was carried out to ensure that items were delivered on time;
- delivery of supplies directly to consignees when received from offshore and as far as possible, for locally procured supplies as well.
- regular interaction with programme sections to advise them on inventory stocks and status of PGMs/POs placed;
- suppliers were visited to monitor work-in-progress and also to evaluate and assess their capability and performance – non-performance was taken seriously and three suppliers blacklisted. Local suppliers were encouraged as a step towards capacity building - as an example, a number of carpentry workshops were assigned to carry out manufacture of school furniture in the districts. Printing of UNICEF calendar for 2008 was undertaken locally and the results are comparable to international standards.

Interaction between Supply Division Copenhagen and the Supply Section in Sierra Leone was very positive throughout the year, leading to supplies being received to a large extent on time and cooperation and clarifications given on issues raised.

The warehousing situation has improved considerably, although perishable goods still need to be stored in appropriate conditions and distributed at the earliest, wherever possible. In this regard, UNICEF is supporting the construction of two warehouses – the first near the Freetown office belonging to the Ministry of Health and Sanitation to store all items related to malaria control and the second at Magbenteh therapeutic feeding center in the North, which will be used to house nutrition items. Construction of these two warehouses is expected to be completed in early 2008. It is also hoped that UNITRACK will be introduced soonest in Sierra Leone.

The Supply Manager also visited in 2007 UNICEF Liberia to discuss the possibility of inter-regional procurement and learn from other neighboring countries of their experiences in local procurement and warehousing.

As the UN's Lead Agency for Procurement, UNICEF initiated a local market survey of all potential suppliers in Sierra Leone as a joint UN effort. The expected outcome will be a database of suppliers which can be accessed by all UN Agencies to obtain bids through a competitive process. The technical and commercial evaluation of the proposals received is under progress and an SSA will be issued shortly. Costs of the survey will be shared by all UN Agencies.

e) Information Technology

Notes

The Sierra Leone Country Office upgraded the version of Lotus Domino to Version 6.5.5 in November this year and is currently in the process of upgrading the client versions to Version 6.5.5. The sub offices in Makeni and Kenema do not have their own servers, but their staffs access their mail using SSL VPN or Sita Business Everywhere.

To improve office effectiveness staff make use of the following Notes Databases: Helpdesk, Telephone (recently upgraded to Version 2) and the Property Inventory (Currently with the Global Help Desk regarding its upgrade).

IT Security

The office is currently using Symantec Anti virus 8.1. The Managed installation is in use and is installed on the primary domain server. The updates are automatically obtained from the Global Help Desk. Daily backups are performed on to SDLT tapes and stored off site in the residence of the Information and Communications Officer. The latest Microsoft Patches are applied within two weeks of their General Release from the Global Help Desk.

At present, the office is re-imaging all computers with the latest image Version 1.5.3. This latest image includes the latest version of Notes, Adobe Acrobat and Sita Business Everywhere; it also has improved security features.

Global connectivity

The office is still connected to the Wide Area Network using a VSAT with Telenor as a Satellite Provider. However, a Site Survey for EMC, the new VSAT providers to be used by UNICEF globally has been completed. For internet traffic an Internet Service Provider is used to free up some of the bandwidth on the VSAT which is used primarily for UNICEF applications, Lotus Notes and ProMS Replication. The Sub offices are connected to the Internet through Sky Vision VSAT to enable them to access their Emails and internet/intranet.

ProMS and P&P

PromS has been upgraded to Version 8.1. The ICT staff act as the Systems Administrators and there are two other staff acting as Applications Administrators. Sub offices do not have access to PromS.

Radio/ Telecommunications

All staff have a working VHF Handset and all vehicles have a working VHF/HF mobile set. Despite the recent reduction in the Security Phase in Sierra Leone from III to II, all vehicles are monitored periodically during field trips. The office is currently in the process of replacing the outdated PaBX system. On replacement of the PaBX system all users will be given access to the VOIP. Access to the VOIP was disconnected because the current system lacks billing capabilities.

f) Readiness for emergency response

An emergency simulation operation was organized in May 2007 with support from the Regional Office; 30 staff members participated in the simulation exercise. Strengths and weaknesses on which to build better emergency response were drawn out and the EPRP was revised. Closer monitoring of the progress on the list of actions agreed upon for emergency preparedness needs to be made in the context of the 2008 CMT meetings. Also, a three day EPR training to which 25 staff members participated was organized in October 2007.

g) Management indicators

In addition to the management indicators reported on in annex 1 of this report, a system is in place and functioning to monitor the quality of donor reports: the draft reports prepared by the sections are reviewed by the Deputy Representative, then forwarded to the Communication officer for another review and finally to the Representative. There have been a very few instances in 2007 in which donors came back to the country office for clarification/correction in relation to the reports submitted.

h) Other management areas which still require improvement

The office needs to invest in 2008 in clear work processes with well defined accountabilities at all levels. This will improve performance, facilitate programme implementation and ensure that checks and balances are in place.

The need for further capacity building of staff is still there. Two areas which will be specifically emphasized in 2008 are: further training and empowerment of the programme assistants, given their role in budget monitoring, and further orientation and training for the heads of programmes and units on management skills, in particular supervision and coaching.

i) Changes envisaged in the 2008 Annual Management Plan

A number of changes will be introduced to the 2008 AMP, as this will be the first year of the new country programme.

A number of mechanisms will be established to ensure coordination and consistency among the technical experts across the programmes, particularly for HIV/AIDS, water, sanitation and hygiene and child protection. These technical units will hold regular horizontal coordination meetings, cutting across the three programmes to ensure technical coherence, complementarity and consistency of their interventions.

In terms of quality budget monitoring and timely funds utilization, the status of cash, travel, supply and contract requisitions will be reviewed every two months to avoid under-utilization of expiring PBAs. Other budget monitoring tools will be applied and followed to ensure timely utilization of funds.

As the country programme shifts from an emergency to a fully fledged development programme, more emphasis will be given to investing in strategic interventions, such as review and input into budget preparation of the key line ministries and into identifying effective ways by which UNICEF could engage in capacity building of government institutions beyond what has been done until now.

4. STUDIES, SURVEYS, EVALUATIONS AND PUBLICATIONS COMPLETED IN 2007

4.1. Studies, surveys and evaluations completed in 2007

Title: MAPPING OF ORGANISATIONS WORKING FOR ORPHANS AND VULNERABLE CHILDREN IN SIERRA LEONE

- Year 2007
- Sequence Number 2007/001
- Type of report Study
- Recommended for inclusion in the Evaluation and Research Database
- Themes covered by the report Child protection, orphans and vulnerable children, child residential care

Title: IMPROVING RESIDENTIAL CARE FOR CHILDREN IN SIERRA LEONE

- Year 2007
- Sequence Number 2007/0002
- Type of report Study
- Recommended for inclusion in the Evaluation and Research Database
- Themes covered by the report Alternative care, child protection

Title: STUDY ON KNOWLEDGE, ATTITUDES, BEHAVIORS AND PRACTICES SURROUNDING INFANT AND YOUNG CHILD FEEDING IN SIERRA LEONE

- Year 2007
- Sequence Number 2007/003
- Type of report Study
- Recommended for inclusion in the Evaluation and Research Database
- Themes covered by the report infant feeding, breastfeeding, complementary foods

Title: PRELIMINARY STUDY ON THE PATTERNS OF FEMALE GENITAL CUTTING IN SIERRA LEONE

- Year 2007
- Sequence Number 2007/0004
- Type of report Study
- Recommended for inclusion in the Evaluation and Research Database
- Themes covered by the report FGC, child marriage, secret societies, initiation rites

4.2. Publications and Videos in 2007

School Sanitation and Hygiene Education (SSHE) Hand book

- ❖ Objective: To support the country towards the achievement of MDGs 4 through hygiene promotion
- ❖ Target Audience: Government, development partners, communities, parents, teachers and children themselves
- ❖ Authors: Government of Sierra Leone, UNICEF, local and international NGOs
- ❖ Quantity printed: Only on electronic Copy expected to be printed in 2008
- ❖ Estimated Costs: Technical assistance through a P3 programme communication consultant, who worked inter alia on this manual

Pikin News Paper

- ❖ Objective: To promote child participation as one of the key tenets of the CRC through the print media
- ❖ Target Audience: Children in Sierra Leone, policy and decision makers
- ❖ Authors: Children's Forum Network
- ❖ Quantity printed: 3,000 (two editions of 1,500 each produced during the course of the year)
- ❖ Estimated Costs: US\$2,000

UNICEF 2008 Calendar

- ❖ Objective: To promote child participation as one of the key tenets of the CRC through the print media
- ❖ Target Audience: Children in Sierra Leone, policy and decision makers, development partners, NATCOMS, Donor Governments, GRO, WCAR and NY
- ❖ Authors: UNICEF Sierra Leone/Children's Forum Network
- ❖ Quantity printed: 6,000 wall calendars (5,000 off shore and 1,000 local printing) 1,000 desk calendars printed off shore
- ❖ Estimated Costs: US\$25,600

Child Survival with specific focus on Malaria (Video)

- ❖ Objective: To foster partnership and leverage resources for children in Sierra Leone in achieving MDGs 2
- ❖ Target Audience: NATCOMS, Donor Governments and International media
- ❖ Authors: External Relations Unit UNICEF Sierra Leone and Richard lee and team from the African Service Unit of the UNICEF media Hub, based in South Africa
- ❖ Quantity printed: Widely disseminated through UNICEF Global Web, NATCOMS and the news market
- ❖ Estimated Costs: Staff time and mission estimated at US\$11,000

Child Disability (Video)

- ❖ Objective: To foster partnership and leverage resources for children in Sierra Leone in achieving MDG 6
- ❖ Target Audience: NATCOMS, Donor Governments and International media
- ❖ Authors: External Relations Unit UNICEF Sierra Leone and Belgian TV

- ❖ Quantity printed: Covered on Belgian TV and PSA aired on local television
- ❖ Estimated Costs: Cost covered by Belgian NATCOM and the TV

HIV/AIDS and Children (Video)

- ❖ Objective: To foster partnership and leverage resources for children in Sierra Leone in achieving MDGs 2
- ❖ Target Audience: Princess Matildha of Belgium, Belgian NATCOM and International media
- ❖ Authors: External Relations Unit UNICEF Sierra Leone and the Sierra Leone broadcasting Service
- ❖ Quantity produced: Covered by Belgian Media
- ❖ Estimated Costs: Technical support and equipment was provided by UNICEF for the production of the clip

5. SPECIAL REPORTS

5.1. Input to the Mid Term Review of the MTSP

How helpful is the framework provided by the 2006-2009 MTSP to Sierra Leone country programme?

The MTSP Framework has been used as the main tool for planning the 2008-2010 UNICEF country programme for Sierra Leone. The Programme was built using strategic focus on key priorities for children in which UNICEF has a comparative advantage and to which it can bring added value. The Programme promotes also inter-sectoral collaboration to maximize impact in terms of results for children and ensure coherence. The Programme is also very well built along a human rights based approach, focusing on developing policy and legal frameworks for realizing children's rights to health care, education and protection.

As shown in the matrix below, there is strong harmony between the Country Programme outcomes for 2008-2010, the UNDAF outcomes for 2008-2010, the national priorities as expressed in the 2004-2007 PRSP, the MDGs and the MTSP focus areas. MTSP focus area 5 cuts across all three components of the 2008-2010 country programme. In fact, three key strategies of the 2008-2010 programme are: first, partnership and resource leveraging for achieving the health and education related Millennium Development Goals and fulfillment of children's rights; second, active policy dialogue with all stakeholders to ensure that the priorities identified for children are addressed and properly reflected in resource allocations and engagement in debates and dialogue on poverty reduction and public sector to put children in national plans, budgets and social policies, and; third, engagement in aid coordination, following the Paris Declaration.

2008-2010 GoSL and UNICEF Country Programme Outcomes	2008-2010 UNDAF Outcomes	2004-2007 PRSP	MDGs	MTSP focus area
<p>Outcome 1: Reducing under five mortality and maternal mortality by one third</p>	<p>Outcome 3: By 2010, health for children under five years of age and for women in child bearing age has improved and child and maternal mortality rates have been reduced</p> <p>Outcome 5: By 2010, there is increased</p>	<p>Pillar 3: Promote human development</p> <p>Pillar 2: Promote pro-poor sustainable growth for food security and job creation</p>	4, 5 and 6	MTSP focus area 1 MTSP focus area 3

	access to prevention, treatment, care and support services and decreased related morbidity and mortality from HIV/AIDS, tuberculosis, malaria and related diseases			
Outcome 2: Access to quality education for primary school aged children increased from 70% in 2004 to 85% in 2010	Outcome 4: By 2010, access countrywide to basic education for boys and girls alike will have improved	Pillar 3: Promote human development	2, 3 and 6	MTSP focus area 2
Outcome 3: By 2010, a minimum protective environment for children against violence, exploitation, abuse and deprivation from primary caregivers is established	Outcome 1: By 2010, governance and human rights practices have been advanced at all levels and enforcement arrangements are in place	Pillar 1: Promote good governance, security and peace building Pillar 3: Promote human development	MDGs cannot be achieved without protection of children from violence, exploitation, abuse and deprivation from primary caregivers Child protection is also part of the Millennium Declaration	MTSP focus area 4

Are there specific Focus Areas and/or Organizational Targets in the MTSP that are **not** relevant for the Sierra Leone country programme and if yes, which are they?

No.

Are there specific results or targets that are **not** included in the MTSP that the UNICEF-assisted Sierra Leone country programme of cooperation **is** committed to, due to country conditions? If so, what are they?

No

Please rank the extent to which you consider that the UNICEF-assisted Sierra Leone programme of cooperation **has so far been able to reflect and promote each of the supporting and cross-cutting strategies** in the MTSP (on scale of 1 – 5 ... 1 being “very poorly” and 5 “very strongly”)

- a) Human rights based approach to programming **4**
- b) Gender Equality **2**

Gender equality has not been dealt with very well in the context of the current programme largely because:

- **There has not been any gender assessment of the Programme.**
- **Gender inequalities in Sierra Leone are deeply rooted in cultural beliefs and practices. UNICEF may not be well equipped to deal with at this moment in time, given the focus of the interventions on accelerating service delivery, especially in the areas of child survival and education.**
- **While it is true that the Programme has recognized that it will not be possible to reduce child and maternal mortality levels in Sierra Leone without addressing child marriage and FGC, for example, the degree to which the Programme will be able to address those practices is questionable as these are staff intensive interventions and require long term and intense support.**
- **While it is true that the Education Programme emphasizes girls’ education, it may be difficult in a country like Sierra Leone with such high poverty levels and high levels of unemployment to convince families about the value of education for their girls. It has not been possible until now to identify the evidence from local experience that can be used to effect this change in attitudes and practices towards girls’ education that we would like to see reflected in our results (beyond of course the principle of the right to education!).**

c) Results based Management 4

d) Generation and use of Knowledge including good practices and lessons learned 4

e) Strengthening Evaluation 2

More efforts will need to be exerted in this area. Evaluation needs to be done against impact, and this may be difficult in the context of a post conflict country, where most of the interventions have focused on relief and short term service delivery.

f) Partnership for shared success: furthering UN reform, working with civil society, leveraging resources and improving results for children 4

List up to three significant changes/adjustments that you would recommend, in order to make the MTSP more relevant and useful for the country programme of cooperation and UNICEF operations.

- **To be more effective, interventions need to be disaggregated by specific types of countries, for example between low-, middle- and high income countries and emergency and transition countries.**

- **To be more effective, there is a need to take stock of what other UN agencies are doing (especially in the light of UN Reform and one UN) and what other key partners are doing in the MTSP focus areas**

5.2 Innovations and lessons learned

Category: Innovation

MTSP Focus area: The innovation presented here is largely based on the MTSP's call for strategic focus around key priorities for children and promotion of inter-sectoral approaches that address the multiple rights of children in a low income post conflict country such as Sierra Leone in a consistent and protective manner. It is also based on the understanding that none of the MTSP goals could be achieved with the programmes operating independently. The new 2008-2010 UNICEF country programme for Sierra Leone would establish three intersectoral programmes – Child Survival and Development, Basic Education, and Child Protection – designed to work together on the MTSP Focus Areas. The Child Survival and Development programme would concentrate on focus areas 1 and 3, but also contribute to focus area 2. Education would concentrate on focus area 2, but contribute to focus areas 1, 3, and 4. Child Protection would concentrate on focus area 4, but also contribute to focus areas 1, 2, and 3. Policy advocacy and partnerships, focus area 5, would be worked on by all programmes.

Country: Sierra Leone

Title: Intersectoral Integrated Programming: the 2008-2010 UNICEF Programme for Sierra Leone

Summary: Experience over the past several years in Sierra Leone has shown that effective work on children's priorities such as Child Survival or Universal Primary Education requires an intersectoral approach. Unfortunately, there is often personal and institutional resistance to sharing ideas and collaborating across traditionally separate programmes; those often remain vertical programmes operating in silos. In order to overcome these barriers, UNICEF Sierra Leone redesigned the existing structures to facilitate the development of relationships and partnerships across programme areas, both within and outside of UNICEF. By including multi-sectoral interventions under one programme and by "embedding" specialists from various programmes into the Child Survival and Education programmes, it is possible to accelerate the building of partnerships necessary to achieve results for children.

Potential application: The approach adopted in the 2008-2010 Sierra Leone country programme can be applied in other contexts– regionally, nationally, and in emergency situations. There are no structural barriers

to applying this approach. The only pre-condition is a strong will for change and a commitment to deal with difficulties that may come along the way; the experience so far in Sierra Leone has shown that as long as the senior management of the office has a clear vision, and as long as a process of dialogue is built among staff within the office to create the consensus required around the innovative approach, then there are no other barriers to applying this approach. The intersectoral approach in Sierra Leone could be used as a model for other countries and regional offices to bridge the divide between the various programmes, and establish a more open exchange of ideas. This will help ensure that programmes touch all aspects required to realize children's rights and address the root causes to the threats facing them.

Issue: Extensive efforts were exerted in the context of the 2004-2007 UNICEF programme of cooperation in Sierra Leone. However, the results have not been commensurate with the efforts exerted and Sierra Leone continues to have the highest child and maternal mortality rates in the world; also, 31% of children in primary school age are still out of school. The importance of a multi-sectoral approach to these two key priorities for children has become increasingly clear. Interventions in health and education alone are not enough to make the change required in child mortality levels and in primary education. To achieve the MTSP Goal 4 of reducing the high child mortality rate, there needs to be a concerted effort to address root causes such as child marriage and other traditional harmful practices. This means that specialists from Health need to work with Education and Child Protection. Education's focus on increasing girls' enrolment, retention and completion, which supports MTSP Goals 2 and 3, requires a similarly intersectoral approach by ensuring safe drinking water, sanitation and hygiene, as well as basic levels of safety from sexual abuse and harassment. In short, in order to effectively achieve the overall goal, all the programmes need to work in consultations and partnerships with the other ones. Unfortunately, due to the structure within most UNICEF offices, there is often a divide between the various programmes in terms of exchanging ideas and working together on projects. As a result, programmes were sometimes less efficient and effective than they could have been.

Strategy: Because of these concerns, UNICEF Sierra Leone decided to restructure the country programme and the staff structure for the 2008-2010 programme cycle to represent the new intersectoral approach to programming and to establish new partnerships both inside and outside of UNICEF. The number of programmes has been reduced from five - Health, Child Protection, WASH, HIV/AIDS, and Education - to three - Child Survival and Development, Child Protection, and Education. Child Survival and Development has five components: Child and Maternal Health, HIV/AIDS, Nutrition, Child Protection and Water, Sanitation and Hygiene. Basic education contains three components: Education, Child Protection and Water, Sanitation and Hygiene. The Child Protection component remains the same but has been expanded by having child protection specialists embedded within the Basic Education and Child Survival programmes. The new intersectoral approach has also required the programmes to build new partnerships with relevant stakeholders outside of UNICEF. The three core programmes were supported by the technical units of Social Policy, Planning, Monitoring and Evaluation and External Relations and Advocacy. All the programmes expanded their government partners to include the other line ministries. For example, the Basic Education programme's key partners now include both MSWGCA and MOHS in addition to MEYS. The programmes have also expanded their NGO partners to ensure that the cross-cutting strategy brings a variety of actors and perspectives to the table. This allows UNICEF to develop an intersectoral approach internally, as well as leading other relevant partners to think and work intersectorally.

Progress and results: Because the implementation of the strategy is only in its initial phases, the results have been limited so far. The main examples have been the development of the AWP for 2008, and here the record has been mixed, in that attendance from all programmes to the workshops for preparing the respective AWP has not been consistent. This has limited the exchange of ideas to some extent.

Still, there have been steps in the right direction as programmes are increasingly aware of the importance of bringing other programmes on board, and a greater variety of stakeholders have been represented in workshops. For example, at the Child Protection AWP Workshop, partners in Education and Child Survival participated and contributed to the discussion including representatives from MEYS. The participation of the various programmes has already resulted in substantive changes in the AWP. The new strategy has also been

buttressed by GoSL recognition that education cannot be the responsibility of MEYS alone nor child survival the sole responsibility of MOHS.

The new intersectoral approach has also contributed to the transition to development in two ways. First, the intersectoral approach requires more long-term consultations and sharing of ideas to identify and address the roots causes of the problems. This view towards long-term solutions fits into development work, while still maintaining a commitment to high quality services during the persistent “silent emergency” in Sierra Leone. Second, the intersectoral approach deals with the holistic child rather than just short-term immediate needs. This means addressing all the threats to children as linked, and ensuring that child health is supplemented and supported by education and legal empowerment.

Next steps: Breaking down the divide between the various programmes will require continuous attention and focus for primarily two reasons. First, the new structure requires staff to be both students and teachers within UNICEF. This requires staff on all levels to have an awareness of the importance of sharing ideas, a willingness to value the process as much as the end result, and an openness to input from non-experts, who may ask seemingly self-evident questions. Developing these skill sets may require new capacity-building efforts for UNICEF staff. Over the past year, efforts at internal capacity-building have already been made with Leadership Training Sessions for instance. It may need to be explored whether similar types of sessions will be necessary to facilitate the intersectoral approach.

Second, like any other organization, UNICEF has its own culture and standard operation procedure. It is easy to simply continue operating in the normal way especially with the tremendous workload in a country like Sierra Leone. This means that the specific areas where consultations are necessary need to be carefully delineated; otherwise, staff might see intersectoral consultations as a waste of time and begin to put it lower in the priorities. The intersectoral approach also requires developing specific forums and opportunities to ensure that staff from multiple programmes work together and share ideas.

5.3. Consolidated Appeals (CAP)

UNICEF Sierra Leone did not submit any proposals as part of the 2007 CAP.

UN Reform and Inter-Agency Collaboration

A. The Resident Coordinator System and the UN Country Team

1. Highlight the most significant achievements by the UNCT in the past year (operational, programmatic, advocacy, political):

The UNCT's main achievements (as far as children's rights are concerned) are:

- **The finalization of the UNDAF where 3 out of 5 priorities are very strongly child rights focused**
- **The joint statement against FGC and other harmful traditional practices**

Please outline any major problems in the UNCT in the past year:

The UNCT's major shortcoming, as far as the advancement of the children's agenda is concerned, is its reluctance to be engaged (not even as observer) in budget discussions, including the Mid Term Expenditure Framework and the Multi Donor Budget Support. It is very difficult to advocate for a seat at the discussion table, particularly as UNDP is claiming the exclusivity of that role and is not keen in assessing and evaluating the effectiveness and efficiency of its current performance in that particular area.

2. Did the UNICEF Office participate substantively in the preparation of the RC's Annual Report ?
The preparation of the RC's Annual Report 2006 was given very little attention. The 2007 Annual Report has not been drafted yet; the exercise has not been mentioned yet in the regular UNCT meetings.
3. How much (if any) financial support did UNICEF provide for the functioning of the RC Support Unit? How much staff time (roughly)?
UNICEF has provided the support of a Senior Child Rights Advisor to the RC office for the first two months in 2007. In addition, UNICEF staff (Representative, Deputy Representative and Planning Officer) do contribute to ad hoc activities of which the RC is in charge. UNICEF played for example a key role in the drafting of the 2008-2010 UNDAF.
4. Please list any issues on which greater clarity or better guidance/support are required from UNDG or UNICEF on the functioning of the RC System and UNICEF's participation in it.
Urgent clarity is required in distinguishing for UNDP its programmatic role and its role as coordinating UN agency. UNDP goes too often solo when it is supposed to act on behalf of the UN as a whole. The UNCT is hardly informed for example of UN – donor coordination meetings; UN's contributions to the PRSP preliminary drafting process and to the MDGs' needs assessment

B. Joint programmes and projects

For 2007, there were no Joint Programmes. However, a Joint UN Programme in support of the National Reproductive and Child Health Plan has been prepared at the end of 2007. The Joint UN programme covers presently two areas: comprehensive and emergency obstetric and neonatal care and prevention and management of malnutrition. However, the possibility exists for expanding the Joint programme to include other areas of joint UN work in support of the Reproductive and Child Health Plan. The Joint programme is a contribution to the 2008-2010 UNDAF.

The UN agencies currently participating in this Joint programme are UNICEF, WFP and UNFPA (with possibilities of other UN agencies joint in at later stages). So far, WHO has expressed its preference for parallel funding. The UN participating organizations have selected UNICEF as the Administrative Agent for funds offered from donors and Development Partners to this Joint UN

programme in support of the National Reproductive and Child Health Plan. Donors have decided that their support to the UN for its work on the Reproductive and Child Health Plan will not go to individual agencies, but into a Joint Account opened for that purpose.

The total budget of this Joint UN Programme is 44,467,481 US Dollars for a period of three years (2008-2010). So far, Irish Aid has provided 1.5 million US dollars into this Joint Account.

C. Poverty Reduction Strategies/Strategy Papers and collaboration with the World Bank

1. Does the country have a comprehensive national plan or strategy on economic growth and poverty reduction? (Yes/No):

A 2005-2007 PRSP is available. However, the 2008-2010 PRSP is still in the process of being drafted.

If yes:

a) Is it a formal PRS (P) (Interim, full, or already in 'Progress Report phase') i.e. prepared in collaboration with the WB and IMF? (Yes/No): **A progress report on the implementation of the 2005-2007 PRSP was presented at the Consultative Group on Sierra Leone Meeting in November 2006.**

b) Is it another kind of national planning tool? If so, please comment and give the name of the process and planning tool.

N/A.

c) Please comment on timeframe and stage of implementation of the existing planning tool.

2005-2007

d) Please indicate if there is any planned/forthcoming PRS (P) or other national planning tool.

Work on the 2008-2010 PRSP was initiated in early 2007. However, the election process that started in July slowed down this work. For the time being, there is no information about the status of progress in drafting the 2008-2010 PRSP.

2. Does the national growth/poverty reduction strategy address the key issues for the rights and priority needs of children and women in the country as highlighted in Section I of this Annual Report? Please give examples.

The current PRSP (2005-2007) addresses the issues of child health, maternal health, education, HIV/AIDS and water and sanitation under its pillar III which focuses on promoting human development. Other issues related to child rights in the area of child protection are reflected under pillar I which focuses on promoting good governance, security and peace building. It is expected that the 2008-2010 PRSP will follow/include the same priorities.

3. Regarding UNICEF's involvement in the PRS (P) or other national planning tool:

a) Who is in charge of dealing with questions of the PRS (P) in your office?
The Representative, the deputy-representative and the planning Officer are the main persons involved.

b) How was your office involved in the preparation or implementation process for the PRS (P) or other national planning tool (tick as appropriate and specify further if necessary):

- i) comments on drafts? ()
- ii) attending meetings (specify which kind of meetings)? ()
- iii) advocacy for integration of children's rights (specify how)? ()
- iv) provision of data (specify type)? ()
- iv) support of/collaboration with Govt. in drafting or reviewing the PRS (P) (specify)? ()
- v) other (specify)?

So far, the office has not been involved in the preparation of the PRSP, as no formal progress is taking place in that regard.

4. Are there currently any Sector-Wide Approaches (SWAps) in the country? If yes: is UNICEF involved (specify how)?

No, there are currently no SWAps as such in Sierra Leone. However, there is an Education Sector Plan and a draft Strategic Plan on Reproductive and Child Health. Donors and development partners have expressed their interest to fund these two plans on a pooled basis.

5. Are there areas of significant UNICEF collaboration with the World Bank in the country? If so, please briefly describe this involvement or collaboration during 2007, and also any future opportunities and challenges.

UNICEF is working very closely with the World Bank in health and education sectors. UNICEF is the lead agency in both sectors and coordinates/harmonizes the contributions of the Development Partners groups on these two areas.

Cooperation with the World bank was critical in leveraging substantive resources for both sectors through EFA/FTI for education and Africa Growth and Development Fund for health.

The World Bank is also very cooperative in helping to ensure that human development is given due attention in budget discussions (including the Mid Term Expenditure Framework and the Multi Donor Budget Support. The World Bank strongly supports UNICEF's call for participation in these discussions.

6. Please describe any UNICEF contributions (e.g. staff support and technical inputs) to the development of national proposals to the Global Fund on AIDS, Tuberculosis and Malaria (GFATM) or to the Global Alliance for Vaccines and Immunization (GAVI).

UNICEF has been fully involved in the preparation and submission of the round six Proposal of the Global Fund, for Malaria, AIDS and Tuberculosis. The AIDS component was approved. In collaboration with UNICEF WCARO and HQs, UNICEF Sierra Leone country office provided particular assistance for the development of the proposal for HIV/AIDS. The 4ps were integrated in the proposal. An approved budget of US\$26.5 millions was obtained for the next 5 years. UNICEF's advocacy and contribution have allowed that 50% and 10% of the total share of ARVs for treatment be allocated to women and children respectively.

The office is currently already engaged in providing technical support for the preparation of the Round 7 Global Fund application. UNICEF is an active member of the Country Coordinating Mechanism (CCM).

UNICEF is an active member of the GAVI Alliance, and carries a tremendous responsibility as a member of the Technical Committee of the ICC and member of the GAVI Board. In line with GAVI's mandate, UNICEF participates in coordination of the GAVI support and ensures that GAVI support reaches more children. As a member of the ICC, UNICEF facilitates introduction of new vaccines, supports social mobilization to increase demand for immunization, and contributes to strengthening of health systems. UNICEF also plays a great role in ensuring financial accountability by partners.

D. Common Services/Premises

At the level of Freetown, there are no common premises for the UN.

The only common premises are at the level of the field offices in Makeni, Bombali District, where UNICEF still leads the UN agencies. The UN House in Makeni is now hosting two UN Agencies: UNDP and UNICEF.

The two UN Agencies are sharing all operations costs involved including the Salaries of the Senior Administrative Assistant at GS7 level and the Radio Operator at GS3 level; for the new country programme CPMP 2008-2010 the position of the Radio Operator at GS3 is now upgraded to GS4.

Common services exist in the following areas:

- 1) Procurement of Avian flu by UNICEF on behalf of all UNCT**
- 2) Joint UN clinic (UN Dispensary and UNIOSIL Clinic)**
- 3) UN Security System (FS)**
- 4) Contract for Security Service Leads by UNDP.**
- 5) Joint agreement with WFP signed since 2005 still operating in the area of maintenance of the vehicle fleet**
- 6) Letter of agreement with UNHCR still operating for logistic support, making their trucks available to transport UNICEF supplies to the districts; however, this is not done systematically but on request and UNICEF pays for the cost of fuel and DSA involved.**

H. Other Issues

Please comment on any other issues related to the process of UN reform and inter-agency collaboration at the country level that you would like to bring to the attention of the Organization.

The presence of UN Integrated Office on Peace Building and Peace Consolidation is critical in areas such as governance (for example the critical role they played in supporting successful presidential and parliamentary elections) and it gives the UN definitely political clout. However, the integration of the development agenda is not always as successful, including in the area of human rights promotion and protection. The UNCT and the mission, although under the same leadership of the ERSG/RC, continue functioning both in programmatic and operational terms very separately. UNICEF is often in a rather uniquely uncomfortable position as all areas of peace consolidation/building are of certain relevance for children and children's rights and therefore is often the sole agency interested/concerned about proper integration.